



United States
of America

Congressional Record

PROCEEDINGS AND DEBATES OF THE 116th CONGRESS, FIRST SESSION

Vol. 165

WASHINGTON, WEDNESDAY, JULY 10, 2019

No. 115

Senate

The Senate met at 9:30 a.m. and was called to order by the President pro tempore (Mr. GRASSLEY).

PRAYER

The Chaplain, Dr. Barry C. Black, offered the following prayer:

Let us pray.

Eternal Spirit, may our lawmakers delight today in Your guidance, finding joy in their fellowship with You. Lord, strengthen them by this fellowship, enabling them to be like productive trees planted by streams of water.

Lord, give our Senators the wisdom to live for Your glory, using them to provide deliverance for captives and freedom for the oppressed.

In you, O God, we find refuge. Continue to guide us, strong deliverer, for we are pilgrims in this life.

We pray in Your sovereign Name. Amen.

PLEDGE OF ALLEGIANCE

The President pro tempore led the Pledge of Allegiance, as follows:

I pledge allegiance to the Flag of the United States of America, and to the Republic for which it stands, one nation under God, indivisible, with liberty and justice for all.

The PRESIDING OFFICER (Mrs. BLACKBURN). The Senator from Iowa.

Mr. GRASSLEY. Madam President, I ask unanimous consent to speak for 60 seconds as in morning business.

The PRESIDING OFFICER. Without objection, it is so ordered.

EAGLES ACT

Mr. GRASSLEY. Madam President, we are all very much concerned about several mass instances of violence around the country. The Secret Service has a program of alerting people to some of those things and training people.

Understanding the common factors of the past acts of mass violence can help

us prevent future tragedies. The Secret Service, through its National Threat Assessment Center, compiles and studies data on these risk factors.

Yesterday, the Secret Service released its report entitled "Mass Attacks in Public Spaces," which confirms that there are often warning signs before targeted violence.

Following up on the expertise of the Secret Service, I introduced a bill that goes by the acronym EAGLES Act to expand the National Threat Assessment Center to conduct additional research and training to prevent targeted violence.

Congress should pass this law to help stop violence before it happens.

I yield the floor.

RECOGNITION OF THE MAJORITY LEADER

The PRESIDING OFFICER. The majority leader is recognized.

ELECTION SECURITY

Mr. MCCONNELL. Madam President, later today, all Senators will have the opportunity to receive a classified briefing on an issue of huge national importance: the security and integrity of our elections.

It is fitting that today's session be one bipartisan, all-Member briefing because, while it is a cliché to say that certain priorities ought to be above partisan squabbling, I know that every one of us shares a genuine concern in maintaining the process through which American democracy plays out.

Those of my colleagues who have read the January 2017 intelligence assessment and the Mueller report will understand that it is precisely our unity and our faith in our democratic system that Vladimir Putin seeks to undermine.

Along with Americans' First Amendment rights to express themselves and speak out, there are few things more

fundamental to the maintenance of our Republic than the electoral process itself.

Thomas Paine wrote, "The right of voting for representatives is the primary right by which other rights are protected."

So preserving and protecting the elections that our State and local authorities conduct is a crucial task. From the Federal Government's perspective, States are firmly in the lead, but sometimes that means lending a hand to local authorities. Obviously, during the Civil Rights era, for example, some Federal guidelines were necessary to preserve integrity.

But many other times, doing the right thing means defending against interference, be it political interference in the constitutionally protected role of the States to conduct elections by politicians and bureaucrats here in Washington or, certainly, interference from America's adversaries abroad.

In 2016, Vladimir Putin sought to interfere in our elections. I have read the intelligence reports. I have read the Mueller report. I have talked with our Intelligence Committee, which has investigated this indepth and has a report coming out soon.

It is important to put Putin's efforts to interfere in our democracy in context because he didn't just decide in 2016 to take such a bold step. He kind of worked up to it, undermining an array of U.S. interests slowly but surely over 8 years of the previous administration's misguided approach to Russia.

Under President Obama, the U.S.-Russia relationship seemed to be defined by two constants: Putin's growing assertiveness in foreign meddling and the administration's failure to confront it.

Putin's 2008 invasion of the sovereign country of Georgia was met by the so-called reset in 2009, which swept the aggression under the rug. The United States may have reset our policy to

● This "bullet" symbol identifies statements or insertions which are not spoken by a Member of the Senate on the floor.



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business as usual, but Putin's aggression continued full bore.

There was the failure to respond to Putin's efforts to strangle democracy in his own country by shuttering western NGOs, arresting dissidents, or possibly ordering the murder of political opponent Boris Nemtsov.

To the extent that the United States responded to the torture and murder by Russian authorities of lawyer Sergei Magnitsky, it was due to congressional pressure.

There was also President Obama's response to Putin's invasion of Ukraine in 2014. Do any of my colleagues believe the administration's response to that outrageous assault on the sovereignty of Ukraine was sufficiently tough to defend against Putin's outrageous assault on fundamental principles of sovereignty and the international order?

There was the debacle with the President's redline in Syria, which turned out to be more like a red carpet for Russian influence in Syria and the Middle East.

And there was the President telling Putin's puppet Medvedev that he could have more "flexibility" to treat Russia differently once he became a lame duck.

All this was under a President who thought it was a clever laugh line to mock our now-colleague Senator ROMNEY for correctly labeling Russia as a threat.

The consequences of American weakness toward Russia were numerous. The more Obama gave, the more Putin took.

Among those consequences, as we all know, was that Putin felt sufficiently emboldened to seek to interfere in our 2016 Presidential election. Through efforts to divide Americans on social media and to hack a political party, agents of a foreign government sought to inject division, doubt, and chaos into our democracy—a sad and embarrassing episode.

President Trump has expressed an interest in a better relationship with Russia, but the actions his administration has taken—which he has authorized—demonstrate that such a relationship will not prevent America from pushing back against Russian aggression.

The administration has pushed back against Russia in meaningful ways, imposing new costs on Putin and his cronies for their malign activities and improving our defenses against Russian active measures. We have adopted new national security and defense strategies that treat Russian aggression like the serious threat that it is. We have begun to rebuild our military strength, which was eroded by years of budget cuts and further damaged by sequestration. We have taken steps to provide Georgia and Ukraine with arms to defend against Russian aggression—weapons denied to them by the previous administration despite bipartisan support from Congress. We worked to block Moscow's efforts to increase European reliance on Russian oil and gas. Sec-

retary Mattis led efforts—continued by his successors—to reform and strengthen NATO.

So important changes are underway at the strategic level. Now we are back to projecting the strength, principle, and resolve that America ought to project.

In addition, the Trump administration has also punched back in very specific ways in response to the election interference that happened on the Obama administration's watch. Thanks to the work of the Special Counsel and the Department of Justice, 28 Russian nationals, intelligence officers, and corporate interests were indicted for their participation in the interference. And in 2018, the administration expelled another 60 Russian agents in response to the poisoning of a former official living in the United Kingdom. These agents are no longer free to conduct intelligence operations or active measures here in America.

These are all tough, important steps that pertain to our broader foreign policy efforts to defer future threats, but there has also been significant work done specifically on our election security. The administration worked quickly to address vulnerabilities and ensure that 2018 wouldn't be a reprise of 2016.

The administration directed resources through the Department of Homeland Security to help local election authorities implement stronger cybersecurity measures. Information sharing was streamlined between DHS, FBI, and State and local officials.

They worked hard to gain the trust of State election officials in my State of Kentucky and around the country and provide them with valuable information through a voluntary information-sharing program that has seen participation from all 50 States and 1,400 localities.

Here in Congress, we appropriated hundreds of millions of dollars in additional aid for State governments to strengthen their systems, and our efforts continue. This year's Defense and Intelligence authorization bills include provisions that will help defend ourselves and our allies against Russian aggression.

The administration will brief us today in classified session about the many steps U.S. agencies have taken since 2016 to improve our defenses and bolster our deterrence against adversaries who seek to undermine our democracy.

The smooth and secure execution of the 2018 election illustrates the success of these measures. This was not a coincidence.

Congress has taken even further action since then, building new legislative safeguards to increase transparency and coordination with the intelligence community on election security.

In short, it is abundantly clear that the administration and Congress take this issue seriously. I look forward to hearing more from the administration

today about what steps have led to this greater success and what even further safeguards they are working on in advance of 2020.

Of course, Congress will need to continue closely monitoring the progress and assess whether future legislative steps might be needed as well. But, as with any time when Washington politicians are clamoring to grab greater control over something this important, we need to make sure this conversation is clear-eyed and sober and serious.

I remember it was President Obama's first Chief of Staff who said: "You never want a serious crisis to go to waste." In other words, bad news can give politicians cover to do things they have wanted to do for a long time.

Remember, it was only months ago that the new Democratic majority in the House decided their top priority for the entire Congress was a massive bill I called the Democratic politician protection act—a sprawling Federal power grab over election law and citizens' political speech.

Among other provisions, it would make the FEC, the currently non-partisan body that regulates political speech, into a partisan weapon.

They also want to give Washington more power to prohibit citizens groups from weighing in on politicians' job performance. They have twice passed bills aimed at centralizing election administration decisions in the Federal Government, in part on the hope that election attorneys, not voters, will get to determine the outcome of more elections—provision after provision that would erode longstanding safeguards. That was the huge proposal just a few months ago.

In light of this, it is interesting that some of our colleagues across the aisle seem to have already made up their minds before we hear from the experts later today that a brandnew, sweeping Washington intervention is just what the doctor ordered.

I, for one, am looking forward to listening to the experts, to hearing more about why the Trump administration was more successful in 2018 than the Obama administration was in 2016. I look forward to ensuring that any additional Federal action actually addresses the problems at hand; that it preserve, rather than undermine, the careful checks and balances that have long been key parts of American democracy since the beginning.

MEASURES PLACED ON THE CALENDAR

Mr. McCONNELL. Madam President, I understand there are two bills at the desk due for a second reading en bloc.

The PRESIDING OFFICER. The clerk will read the bills by title for the second time.

The legislative clerk read as follows:

A bill (H.R. 2740) making appropriations for the Departments of Labor, Health and Human Services, and Education, and related agencies for the fiscal year ending September 30, 2020, and for other purposes.

A bill (H.R. 3055) making appropriations for the Departments of Commerce and Justice, Science, and Related Agencies for the fiscal year ending September 30, 2020, and for other purposes.

Mr. McCONNELL. In order to place the measures on the calendar under the provisions of rule XIV, I would object to further proceedings en bloc.

The PRESIDING OFFICER. Objection having been heard, the bills will be placed on the calendar.

RESERVATION OF LEADER TIME

The PRESIDING OFFICER. Under the previous order, the leadership time is reserved.

CONCLUSION OF MORNING BUSINESS

The PRESIDING OFFICER. Morning business is closed.

EXECUTIVE SESSION

EXECUTIVE CALENDAR

The PRESIDING OFFICER. Under the previous order, the Senate will proceed to executive session and resume consideration of the following nomination, which the clerk will report.

The legislative clerk read the nomination of T. Kent Wetherell II, of Florida, to be United States District Judge for the Northern District of Florida.

Mr. McCONNELL. Mr. President, I suggest the absence of a quorum.

The PRESIDING OFFICER (Mr. CRAMER). The clerk will call the roll.

The legislative clerk proceeded to call the roll.

Mr. SCHUMER. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

RECOGNITION OF THE MINORITY LEADER

The PRESIDING OFFICER. The Democratic leader is recognized.

BORDER SECURITY

Mr. SCHUMER. Mr. President, a new report from NBC News last night detailed the inhumane treatment of migrant children at the Arizona border stations: allegations of sexual assault, retaliation by Customs and Border Protection officers, overcrowding, lack of showers, lack of clean clothes, and lack of space to sleep. The accounts made by dozens of children at these facilities are horrifying and are completely unacceptable.

In the wake of several similar reports about the treatment of migrants by CBP officers in Texas, in the wake of revelations of secret Facebook groups where Border Patrol officers joke about the horrid treatment of migrants, it is abundantly clear that there is a toxic culture at Border Patrol that can only be changed—only be changed—by the immediate firing and replacing of top leadership at the Agency. CBP needs to

clean house. The top people at CBP ought to be fired now.

In just a few days on the job, Mark Morgan, the Acting Commissioner, has already shown himself to be far too callous about the way in which children and their families are treated. We need committed law enforcement professionals to take over the CBP, particularly those who have training and expertise in working with vulnerable populations.

There are rumors that Mr. Morgan was chosen because he is a tough guy—a tough guy—on kids. But he is a tough guy who will tolerate an out-of-control culture in many parts of the CBP.

It is a perfectly wrong choice for what is going on there. I will say this to President Trump. He is not going to help you. Whatever Americans' views are on immigration, they don't like pictures of little children in squalid and awful conditions, whoever they are.

The Acting Secretary of Homeland Security, Kevin McAleenan, who oversees CBP, needs to take this matter into his own hands. He has shown far more balance, far more expertise, and far more ability to talk about the truth—not some ideology—than Morgan or some of the others. He should take this matter into his own hands and pursue changes to the Agency that go beyond mere investigations and reports.

CBP needs a real change in personnel and in leadership, and it needs it now. The reports by NBC News and many others are a stain on this great Nation. We are not perfect. We are a lot better than most everyone else. But in the past, when there was a problem, we didn't revel in it; we tried to solve it. We cannot allow what is happening at the border to continue.

SOCIAL MEDIA

Mr. President, on another matter, a few weeks ago, it was reported that the author of a blatantly, virulently anti-Semitic cartoon depicting the Rothschilds and Soros was invited—actually invited to a social media summit at the White House. Up until yesterday, when the White House was asked questions about why he was invited, there was no answer. Reportedly, some in the administration privately defended the invitation of this out-and-out bigot. Only last night when it all became public did the White House finally revoke the invitation. But it is an absolute disgrace that it was extended in the first place and that it took them long to rescind. And it is a disgrace that the White House has not rescinded the invitations for several other individuals planning to attend who have spewed hateful and bigoted views online.

The plain truth is this: This President and this administration are shockingly willing to provide succor to some of the most hateful ideologues, ideologies, and viewpoints. The President has promoted White supremacists on his Twitter feed while constantly criticizing social media platforms for

removing hateful content. In doing so, he has defended people like Alex Jones and his detestable, conspiracy-ridden radio show.

The idea that everybody should be able to post on social media sites no matter how disgusting the content is wrong, in my view. When vicious, racist, anti-Semitic, and Islamophobic hate speech is posted online, social media sites, as private companies, should be able to remove that content. But this President amazingly seems to believe that when offensive language is coming from a rightwing source and it is taken off social media sites, that is censorship. That is the message this social media summit seeks to advance, and it is un-American.

At the same time, we hear that the White House and congressional Republicans are all too eager to decry anti-Semitism when they perceive it from a political opponent on the left. Well, where are those folks when the White House does something like this? Where are they? It seems some of our friends on the other side of the aisle want to politicize the issue of anti-Semitism, which should be condemned when anybody talks about it, but unfortunately we heard silence from our Republican friends when this virulently anti-Semitic cartoonist was invited to the White House—not a peep. And what he did was despicable and reminiscent of what was done before dictatorships took over in Europe.

The White House was right to revoke the invitation. It never should have been issued in the first place. A social media summit designed to give support to the most radical viewpoints on social media should never have been planned by the White House in the first place. It should be obvious, but with this President, unfortunately, the obvious bears repeating: The President of the United States should appeal to the better angels of our nature and not provide support to the basest voices in our society. It is another reason this Presidency is just a disgrace—a disgrace in terms of American values, American morals, and American honesty.

ELECTION SECURITY

Mr. President, now on election security, later this afternoon, Members from both sides of the aisle will take part in an all-Senate briefing on the threats faced by our elections in the 2020 campaign cycle. We are all no doubt aware of the general threat to our elections from foreign interference. It is crucial to hear from our law enforcement, defense, and intelligence communities about the specific nature of those threats and, just as important—probably more important—how we can counteract them and how we can prevent foreign interference in the 2020 election, which everybody, regardless of party—Democratic, Republican, liberal, or conservative—should be against. This is one of the things the Founding Fathers were most afraid of, that foreign powers would seek to

interfere in our elections. It didn't seem too much of a problem for decades and centuries, but it has now reared its ugly head—by the way, showing the amazing wisdom of the Washingtons and the Madisons and the Franklins and the Founding Fathers.

The briefing we are going to have should serve as a turning point for this Chamber. It should focus our attention and spark an urgent debate on how to protect our democracy from future attacks. The briefing this afternoon should be a springboard for action. So I was amazed to listen to Republican Leader MCCONNELL this morning, who, before the briefing has even taken place, seems to be prejudging the results of the meeting, saying that another Washington intervention in this matter is misguided. I was amazed to hear Leader MCCONNELL take credit for the election security funding which Democrats fought tooth and nail to include in the Appropriations bill and which was initially opposed by many of our Republican colleagues. They skip over the fact that Leader MCCONNELL and Republicans are right now blocking our efforts to include additional resources this year.

Leader MCCONNELL, if you are bragging about having put it in 2016 and the FBI says the threat in 2020 will be greater, why aren't you letting us put more money in now? Why aren't you supporting that?

It makes no sense—a contradiction once again.

And here, amazingly enough, we hear Leader MCCONNELL echoing President Trump blaming President Obama for the interference in the 2016 election—blaming President Obama. The Russians interfered. They certainly had conversations with the Trump administration. Donald Trump encouraged them to interfere, publicly. And now Leader MCCONNELL has the temerity to blame President Obama? What a remarkable feat of revisionist history.

Let's be clear on two things. First, President Putin interfered in our elections, and he is to blame. Second, the Trump administration has not done enough to hold him and his oligarchs accountable. President Trump recently, when he met with President Putin, sort of made a joke of it. That is disgraceful. That is un-American. That is not defending the security of America.

Now, according to reports, we learn that the majority leader refused to work on a bipartisan basis to warn the public about Putin's interference in our elections in the midst of the 2016 election. And he blames President Obama when he was the one who didn't want to make it public? Give us a break.

We have a duty to the country to take this seriously and not whitewash the facts or prejudge the conclusions. This is about protecting the wellspring of our democracy—it is not political—and ensuring Americans have absolute faith that our elections will be free and fair.

It is unbelievable that in this Trump administration, unlike any other administration—Democratic or Republican—before it, interference in the election by a foreign power is made political. It is a disgrace.

I hope today's briefing provides Members with specific information about what the departments and agencies are doing to combat the threat to our elections and what we ought to do next. After it concludes, we cannot let this issue sit on the back burner. Democrats and Republicans alike must roll up their sleeves and get to work—the majority leader included.

HEALTHCARE

Mr. President, on healthcare, finally, as oral arguments continue today in *Texas v. the United States*, we must not lose sight of what is at stake here. Republican attorneys general, with the Trump administration's full support and backing, are trying to dismantle our healthcare system. They are arguing that millions of Americans—including 133 million Americans under 65 who live with a preexisting condition—should lose their care and their protections.

The lawsuit that President Trump supports and our Republican colleagues refuse to condemn would say to a mother or father of a child with cancer: If the insurance company wants to cut you off, tell you that you can't get the treatment your kid so desperately needs to live, that is OK.

Where are those Republican voices?

We all know the statistics, but there is a human cost and a human story behind each one. Emilie is one of my constituents, and I shared her story on the steps of the Senate yesterday. She was a healthy and active, vibrant young girl at age 7, but her life was turned upside down after a tragic accident. She fell off a horse and suffered a traumatic brain injury. Emilie had to relearn how to walk, how to talk, and how to eat—a 7-year-old.

The biggest challenge Emilie's family faced came when her private insurance said to her: Only 60 days of rehab, Emilie, and then you are out. It doesn't matter if you still can't feed yourself, and it doesn't matter if you can't walk.

But she was saved because of Medicaid. Medicaid stepped in, and the protections for Americans with preexisting conditions prevailed. Now Emilie has a great chance in the future. Do we want to tell Emilie's parents that we want to just cut this off?

What is wrong with our Republican friends here? It is the height of hypocrisy for Republicans to pledge support for Americans with preexisting conditions during the campaign season and then be silent as the Trump administration sues to take away all protections.

I call on Senate Republicans, for the sake of the Emilies and the millions like her, to speak out against this reckless lawsuit—a lawsuit that would spell disaster for millions of hard-working, fine citizens in this country.

I yield the floor.

The PRESIDING OFFICER. The majority whip.

Mr. THUNE. Mr. President, we just heard the Democratic leader talking about the issue of healthcare and attacking the President and Republicans for not being supportive of protections for preexisting conditions, and I can tell you that is just not true. I can't think of a single Republican who doesn't believe we ought to provide protection for people with preexisting conditions.

Democrats have not acknowledged that ObamaCare has failed, and I think we can all see the evidence of that. We have seen skyrocketing premiums, copays, out-of-pocket costs, deductibles—all of those things have gone through the roof for a lot of people, particularly in the individual market—as well as a reduction in the number of choices and options. Fewer options and higher costs have been the legacy of ObamaCare, so the Democrats know it has to be replaced. The reason they know it and you can tell it has to be replaced is that they are already out there talking about a proposal—a completely one-size-fits-all, government-run, national approach to taking over people's healthcare in this country called Medicare for All, at a cost of \$32 trillion, which I will come back to in just a moment.

The President and his administration have also acknowledged that ObamaCare has failed because of the skyrocketing costs and fewer choices and have chosen to try to get that repealed through the courts. Either way, we are going to be having a discussion about healthcare here and about what is the best system moving forward.

Republicans, of course, as I mentioned, believe we have to protect people with preexisting conditions. Whatever follows in ObamaCare's wake, I think there is agreement on both sides of the aisle—both Republicans and Democrats—that preexisting conditions will be covered.

So let's just take that political argument off the table because that is all it is. It is nothing more, nothing less, nothing else than a political argument made by Democrats when they know full well that Republicans are on the record in support of protecting people with preexisting conditions.

The question is, What will we replace it with? We believe, obviously, that there is a much better approach that gives people more choices, more options, and creates more competition in the marketplace, which would put downward pressure on prices.

The Democrats, as I said, have endorsed and are supporting a \$32 trillion government takeover of the healthcare system in this country, which will put enormous costs on the backs of working people in this country. I will come back to that in just a moment.

THE ECONOMY

Mr. President, last Friday we learned that there were 224,000 jobs that were

created in June, the latest piece of good news about our strong economy. Thanks to the historic tax reform we passed in 2017 and our efforts to lift burdensome regulations, our economy has been thriving. Economic growth is up, and wages are growing at the strongest rate in a decade. Personal income is up, and unemployment is near its lowest level in half a century.

The benefits of this progress are being spread far and wide. Wages for the lowest earning workers are rising faster than for the highest earning workers. Hundreds of thousands of new blue-collar jobs have been created. Unemployment rates for minorities have fallen. The unemployment rates for Asian Americans, African Americans, and Hispanic Americans are all at or near record lows.

The Wall Street Journal notes, "Nearly one million more blacks and 2 million more Hispanics are employed than when Barack Obama left office, and minorities account for more than half of all new jobs created during the Trump Presidency."

When Republicans took control of the Congress and the White House 2½ years ago, we had one goal: Make life better for hard-working Americans. We knew that Americans had a tough time during President Obama's administration, and we were determined to put more money in Americans' pockets and to expand opportunities for working families. That is exactly what we did. Our tax reform legislation, combined with other Republican economic policies, has created an economy that has lifted up Americans from across the economic spectrum.

There is still more work, of course, that needs to be done. Farmers and ranchers, for example, in places like my home State of South Dakota, are still struggling thanks to years of commodity and livestock prices below production costs, protracted trade disputes, and natural disasters. But overall, American workers are doing better than they have in a long time.

Now we need to focus on preserving and building on the policies that have made life better for American workers over the past 2 years, but that is not what will happen if Democrats have their way. Democrats are not only interested in eliminating a large portion, if not all, of the tax relief that Republicans passed; they are pushing proposals that would result in massive tax hikes on ordinary Americans.

Take Medicare for All, as I mentioned earlier, which is a Democratic proposal for government-run healthcare. A conservative estimate sets the pricetag for this proposal at \$32 trillion over 10 years—more money than the U.S. Government has spent in the past 8 years combined on everything. A more realistic estimate is likely substantially higher, given that the Senator from Vermont's current Medicare for All plan includes coverage for long-term care, which is an enormously expensive benefit.

On top of that, most of the Democratic Presidential candidates have endorsed providing government-funded healthcare to illegal immigrants as well. It is not just a matter of providing healthcare to the millions of undocumented immigrants already here in the United States. More and more Democrats are embracing what is effectively an open-border policy, which means the number of individuals here legally can skyrocket, further driving up the massive costs of the one-size-fits-all, government-run healthcare proposal the Democrats are putting forward. The final pricetag, I am suggesting, could be far more than \$32 trillion.

Of course, Democrats' proposals are not limited to putting the government in charge of healthcare. They have lots of other ideas for more government spending, such as having the government pay for millions of students' college education or eliminating student loan debt—although they don't mention any benefits for Americans who have already done a lot of work to help pay off their student loans.

As expensive as paying for these proposals would be, they pale in comparison to the Democrats' most expansive socialist fantasy, the Green New Deal, which has been estimated to cost somewhere between \$51 and \$93 trillion over 10 years—\$93 trillion. That is more money than the economic output of every country in the entire world in 2017 combined.

How are Democrats going to pay for these policies? Well, when they have an answer, it usually involves taxing the rich. That is all very well, until one realizes there is no way to pay for these policies just by taxing the rich. Medicare for All alone would ultimately require massive tax hikes on ordinary Americans and on American businesses.

What will be the consequences of that? Well, a substantially lower standard of living for American families who would see their tax bill soar and their take-home pay shrink, plus massive tax hikes would wreak devastation on the economy. Load a small or larger business with new taxes, and its ability to grow, invest, expand, and hire new workers shrinks dramatically. That would mean lower wages, fewer jobs, and reduced opportunities for American families already burdened with new tax hikes.

Lowering taxes for American families and American businesses has grown Americans' paychecks and provided them with access to new and better jobs and opportunities. Raising their taxes would have the opposite effect. Yet raising Americans' taxes is exactly what would happen under the Democrats' plans.

Let's hope that Democrats think better of their proposals before the American people are forced to foot the bill.

I yield the floor.

The PRESIDING OFFICER. The Senator from Texas.

Mr. CORNYN. Mr. President, I ask unanimous consent that notwithstanding the previously scheduled vote at 11 o'clock, I be allowed to complete my remarks before that vote occurs.

The PRESIDING OFFICER. Without objection, it is so ordered.

DEBBIE SMITH ACT

Mr. CORNYN. Mr. President, throughout my career, dating back to my days as Texas attorney general, I have long been a proud advocate for crime victims' rights. I believe we all have a responsibility to provide men and women impacted by such traumatic events the resources and care they need when they need it.

Right now the Congress has an opportunity to pass two separate pieces of legislation to support victims of sexual assault and domestic violence. Sadly, both bills have been caught in the crosshairs of political jockeying in the House, with Democrats using a tit-for-tat strategy that has frozen both bills.

One of those bills is called the Debbie Smith Act. The namesake of this legislation is a woman whom I have had the honor of working with many times over the years. She is a fierce advocate for victims of sexual assault.

Like so many victims, her advocacy was born from a personal experience. In 1989, she was abducted from her home and raped in a wooded area. She reported the crime to police and went to the emergency room for a forensic examination, but there were no immediate answers. Though exact numbers are difficult to estimate, some experts believe that there are hundreds of thousands of untested rape kits that remain across the United States.

For 6½ years the DNA evidence of Debbie's attacker sat on a shelf in an evidence locker while she constantly wondered who her attacker was and when he would appear again. Channeling that fear and frustration, Debbie made it her mission in life to eliminate the rape kit backlog. I have no doubt that because of her and the important legislation this Congress has passed for the past 15 years, we were making some pretty incredible progress toward her goal.

In 2004, the Debbie Smith Act was signed into law to provide State and local crime labs with the resources to end the backlog of unsolved crimes. More than \$1 billion has been provided to these forensic labs because of this law, and the legislation passed by the Senate in May will provide even greater resources for the program.

While the original purpose of the legislation was to reduce the rape kit backlog, this DNA evidence serves multiple purposes. It enables law enforcement to identify and convict people who commit other violent crimes and takes more criminals off the street. It also has a corresponding benefit for the wrongfully accused. It can actually exclude people based on the DNA test results in the forensic rape kit.

Because of the Debbie Smith Act, more than 860,000 DNA cases have been

processed, and 360,000 DNA profiles have been uploaded into the FBI's database. This accounts for 43 percent of all forensic profiles in the FBI's DNA database. The benefits of this law cannot be overstated. That is why the Debbie Smith Act was easily reauthorized in both 2008 and 2014.

Now it is time once again to reauthorize this important legislation. Earlier this year, Senator FEINSTEIN and I introduced the Debbie Smith Act of 2019, which reauthorizes the important funding that supports the testing of this DNA evidence. Things like training for law enforcement, correctional officers, training for forensic nurses and other professionals who assist victims of sexual assault are also included in this bill. When the Senate voted in May, not a single Senator voted against it—not one. It was unanimous. But here we are nearly 2 months later and the House of Representatives hasn't lifted a finger.

The bill isn't partisan. It is not divisive. It is not controversial. So why do they refuse to bring the bill up for a vote? Well, they are not holding this bill up because they are working on a different version or because they disagree with any of the provisions or because they simply don't like it. No, they are actually holding it hostage to try to force a vote on their ultrapartisan version of the Violence Against Women Act, or VAWA, the second piece of legislation they are stopping. Actually, Democrats allowed the current Violence Against Women Act to expire over Republican objections so that they could maintain this leverage to pass their ultrapartisan version of VAWA sometime later.

Folks on both sides of the aisle can agree it is time to make some important improvements in VAWA, and our colleague Senator ERNST from Iowa has been working very hard to try to come up with a good bipartisan bill. It deserves to be reauthorized and strengthened to ensure victims have access to the services and protections they need.

Going through the regular order is something I support, and it is an effort that has been led by, as I said, Senator ERNST from Iowa. But the version of the bill that has passed in the House is a far cry from any kind of consensus legislation. It includes provisions that would never pass in the Senate, and that is why it passed the House, in order to create that conflict and that obstacle.

It is not fair to Debbie Smith and other victims of sexual assault for House Democrats to hold them hostage over a separate bill that is still being negotiated in good faith by Members on both sides of the aisle.

Despite repeated requests from advocates and victims' rights groups to pass the Debbie Smith Act freestanding, the House has, once again, chosen to play politics.

I understand Debbie has requested to meet with leadership in the House, and I strongly encourage them to take the

time to talk to Debbie and hear her perspective on why this legislation is so critical and why it must be passed now. House Democrats refuse to pass the Debbie Smith Act and help crime labs eliminate the rape kit backlog. They refuse to negotiate in good faith on VAWA, Violence Against Women Act, reauthorization and what that might look like. Unfortunately, they have succumbed to the temptation of playing partisan politics with pretty important legislation and hurting a lot of innocent people in the meantime. I find that absolutely unacceptable.

I would urge our colleague Speaker PELOSI to bring the Debbie Smith Act up for a vote and quit using sexual assault victims as a bargaining chip.

I yield the floor.

NOMINATION OF T. KENT WETHERELL II

Mr. SCOTT of Florida. Mr. President, I proudly support the confirmation of Judge T. Kent Wetherell II to the U.S. District Court for the Northern District of Florida today. He earned his undergraduate and juris doctor degrees from the Florida State University and has committed himself to public service for the past 20 years. He has served as deputy solicitor general in the Office of the Florida Attorney General; an administrative law judge in Florida's division of administrative hearings; and, for the past decade, as an appellate judge on Florida's First District Court of Appeal. Judge Wetherell will continue to serve our State and Nation well, and I am proud to support his confirmation to the Federal bench.

VOTE ON WETHERELL NOMINATION

The PRESIDING OFFICER (Mr. SASSE). All time has expired.

The question is, Will the Senate advise and consent to the Wetherell nomination?

Mr. CORNYN. Mr. President, I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There appears to be a sufficient second.

The clerk will call the roll.

The legislative clerk called the roll.

Mr. THUNE. The following Senator is necessarily absent: the Senator from Indiana (Mr. YOUNG).

Further, if present and voting, the Senator from Indiana (Mr. YOUNG) would have voted "yea."

Mr. DURBIN. I announce that the Senator from New Jersey (Mr. BOOKER), the Senator from Illinois (Ms. DUCKWORTH), the Senator from New York (Mrs. GILLIBRAND), the Senator from New Mexico (Mr. HEINRICH), the Senator from Vermont (Mr. SANDERS), and the Senator from Virginia (Mr. WARNER) are necessarily absent.

The PRESIDING OFFICER. Are there any other Senators in the Chamber desiring to vote?

The result was announced—yeas 78, nays 15, as follows:

[Rollcall Vote No. 195 Ex.]

YEAS—78

Alexander	Ernst	Murray
Barrasso	Feinstein	Paul
Bennet	Fischer	Perdue
Blackburn	Gardner	Peters
Blunt	Graham	Portman
Boozman	Grassley	Reed
Braun	Hassan	Risch
Brown	Hawley	Roberts
Burr	Hoehn	Romney
Cantwell	Hyde-Smith	Rosen
Capito	Inhofe	Rounds
Cardin	Isakson	Rubio
Carper	Johnson	Sasse
Casey	Jones	Scott (FL)
Cassidy	Kaine	Scott (SC)
Collins	Kennedy	Shaheen
Coons	King	Shelby
Cornyn	Lankford	Sinema
Cortez Masto	Leahy	Sullivan
Cotton	Lee	Tester
Cramer	Manchin	Thune
Crapo	McConnell	Tillis
Cruz	McSally	Toomey
Daines	Moran	Udall
Durbin	Murkowski	Whitehouse
Enzi	Murphy	Wicker

NAYS—15

Baldwin	Markey	Smith
Blumenthal	Menendez	Stabenow
Harris	Merkley	Van Hollen
Hirono	Schatz	Warren
Klobuchar	Schumer	Wyden

NOT VOTING—7

Booker	Heinrich	Young
Duckworth	Sanders	
Gillibrand	Warner	

The nomination was confirmed.

EXECUTIVE CALENDAR

The PRESIDING OFFICER. The clerk will report the next nomination.

The legislative clerk read the nomination of J. Nicholas Ranjan, of Pennsylvania, to be United States District Judge for the Western District of Pennsylvania.

The PRESIDING OFFICER. The question is, Will the Senate advise and consent to the Ranjan nomination?

Mr. JOHNSON. Mr. President, I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There appears to be a sufficient second.

The clerk will call the roll.

The senior assistant bill clerk called the roll.

Mr. THUNE. The following Senator is necessarily absent: the Senator from Indiana (Mr. YOUNG).

Further, if present and voting, the Senator from Indiana (Mr. YOUNG) would have voted "yea."

Mr. DURBIN. I announce that the Senator from New Jersey (Mr. BOOKER), the Senator from Illinois (Ms. DUCKWORTH), the Senator from New York (Mrs. GILLIBRAND), the Senator from New Mexico (Mr. HEINRICH), and the Senator from Vermont (Mr. SANDERS) are necessarily absent.

The PRESIDING OFFICER. Are there any other Senators in the Chamber desiring to vote?

The result was announced—yeas 80, nays 14, as follows:

[Rollcall Vote No. 196 Ex.]

YEAS—80

Alexander	Fischer	Peters
Baldwin	Gardner	Portman
Barrasso	Graham	Reed
Blackburn	Grassley	Risch
Blunt	Hassan	Roberts
Boozman	Hawley	Romney
Braun	Hoeven	Rosen
Brown	Hyde-Smith	Rounds
Burr	Inhofe	Rubio
Capito	Isakson	Sasse
Cardin	Johnson	Schatz
Carper	Jones	Schumer
Casey	Kaine	Scott (FL)
Cassidy	Kennedy	Scott (SC)
Collins	King	Shaheen
Coons	Lankford	Shelby
Cornyn	Leahy	Sinema
Cortez Masto	Lee	Sullivan
Cotton	Manchin	Tester
Cramer	McConnell	Thune
Crapo	McSally	Tillis
Cruz	Menendez	Toomey
Daines	Moran	Van Hollen
Durbin	Murkowski	Warner
Enzi	Murphy	Whitehouse
Ernst	Paul	Wicker
Feinstein	Perdue	

NAYS—14

Bennet	Klobuchar	Stabenow
Blumenthal	Markey	Udall
Cantwell	Merkley	Warren
Harris	Murray	Wyden
Hirono	Smith	

NOT VOTING—6

Booker	Gillibrand	Sanders
Duckworth	Heinrich	Young

The nomination was confirmed.

EXECUTIVE CALENDER

The PRESIDING OFFICER. The clerk will report the next nomination.

The bill clerk read the nomination of Damon Ray Leichty, of Indiana, to be United States District Judge for the Northern District of Indiana.

The PRESIDING OFFICER. The question is, Will the Senate advise and consent to the Leichty nomination?

Mr. WICKER. I ask for the yeas and nays.

The PRESIDING OFFICER. Is there a sufficient second?

There appears to be a sufficient second.

The clerk will call the roll.

The clerk called the roll.

Mr. DURBIN. I announce that the Senator from New Jersey (Mr. BOOKER), the Senator from Illinois (Ms. DUCKWORTH), the Senator from New York (Mrs. GILLIBRAND), the Senator from New Mexico (Mr. HEINRICH), and the Senator from Vermont (Mr. SANDERS) are necessarily absent.

The PRESIDING OFFICER (Mr. LANKFORD). Are there any other Senators in the Chamber desiring to vote?

The result was announced—yeas 85, nays 10, as follows:

[Rollcall Vote No. 197 Ex.]

YEAS—85

Alexander	Cantwell	Cotton
Baldwin	Capito	Cramer
Barrasso	Cardin	Crapo
Bennet	Carper	Cruz
Blackburn	Casey	Daines
Blunt	Cassidy	Enzi
Boozman	Collins	Ernst
Braun	Coons	Feinstein
Brown	Cornyn	Fischer
Burr	Cortez Masto	Gardner

Graham	McSally	Scott (FL)
Grassley	Menendez	Scott (SC)
Hassan	Merkley	Shaheen
Hawley	Moran	Shelby
Hirono	Murkowski	Sinema
Hoeven	Murphy	Sullivan
Hyde-Smith	Paul	Tester
Inhofe	Perdue	Thune
Isakson	Peters	Tillis
Johnson	Portman	Toomey
Jones	Reed	Udall
Kaine	Risch	Van Hollen
Kennedy	Roberts	Warner
King	Romney	Whitehouse
Lankford	Rosen	Wicker
Leahy	Rounds	Wyden
Lee	Rubio	Young
Manchin	Sasse	
McConnell	Schumer	

NAYS—10

Blumenthal	Markey	Stabenow
Durbin	Murray	Warren
Harris	Schatz	
Klobuchar	Smith	

NOT VOTING—5

Booker	Gillibrand	Sanders
Duckworth	Heinrich	

The nomination was confirmed.

The PRESIDING OFFICER. Under the previous order, the motion to reconsider is considered made and laid upon the table, and the President will be immediately notified of the Senate's action.

The PRESIDING OFFICER. The Senator from Wyoming.

EXECUTIVE CALENDAR

Mr. BARRASSO. Mr. President, I ask unanimous consent that the Senate resume consideration of the King nomination.

The PRESIDING OFFICER. Without objection, it is so ordered.

The clerk will report the nomination.

The senior assistant legislative clerk read the nomination of Robert L. King, of Kentucky, to be Assistant Secretary for Postsecondary Education, Department of Education.

ORDER FOR RECESS

Mr. BARRASSO. Mr. President, I ask unanimous consent that the Senate recess from 3 p.m. to 4 p.m. today.

The PRESIDING OFFICER. Without objection, it is so ordered.

The Senator from Wyoming.

HEALTHCARE

Mr. BARRASSO. Mr. President, I come to the floor because Democrats out on the campaign trail continue to spin their one-size-fits-all healthcare plan that they call Medicare for All. The name itself is misleading. I will state that as a doctor who has practiced medicine in Wyoming for 24 years.

Even many Democrats in the first Presidential debate sounded confused about their own proposal. The candidates were asked a simple question. They were asked to raise their hands if they supported eliminating private health insurance. That is the health insurance people get from work. "Just four arms went up over the two nights," but "five candidates who kept their hands at their sides," the New York Times has now reported, "have signed onto bills in [this] Congress that

do exactly that"—take health insurance away from people who get it from work.

On one point, though, they all raised their hands. That was on the question that was asked of all 10 Democrats in round 2 of the debate. They all endorsed taxpayer-funded healthcare for illegal immigrants. Every hand went up.

It seems Democrats have actually been hiding their real, radical agenda. "Most Americans don't realize how dramatically Medicare-for-all would restructure the nation's health care system." That is not just me talking; that is according to the latest Kaiser Family Foundation poll. We need to set the record straight, and I am ready to do that right now.

The fact is, Democrats have taken a hard left turn, and they want to take away your health insurance if you get it from work. The proposal abolishes private health insurance, the insurance people get from work. In its place, they would have one expensive, new government-run system. Still, Democrats know most of us would rather keep our own coverage that we get from work. Even the people on Medicare Advantage—20 million people—would lose it under the Democrats' proposal. The Kaiser poll confirms Americans' top concern is, of course, lowering their costs or, as the Washington Post "Health" column put it, people simply want "to pay less for their own health care."

That is what we are committed to on this side of the aisle.

Many Democrats running for President continue to promote and support this radical scheme by Senator SANDERS. The Sanders legislation would take away healthcare insurance from 180 million people who get their insurance through work, through their jobs. In addition, 20 million people who buy their insurance would lose coverage as well.

You also need to know that the Democrats' proposal ends the current government healthcare programs. Medicare for seniors would be gone. Federal employees' health insurance would be gone. TRICARE for the military would be gone, and the children's health coverage also would be gone under this Democratic healthcare, one-size-fits-all plan. That is confirmed by the Congressional Research Service.

The Congressional Research Service recently sent me a formal legal opinion. I requested it from them. It is a formal, legal opinion, stating: Medicare for All "would . . . largely displace these existing federally funded health programs" that I just mentioned—Medicare, Federal employees' health insurance, TRICARE, children's health coverage. It would largely displace these existing Federal health programs as well as private health insurance, the insurance people get from work.

Mr. President, I ask unanimous consent to have printed in the RECORD the

Congressional Research Service memorandum, dated May 29, 2019.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

MEMORANDUM

To: Senator John Barrasso, Attention: Jay Eberle.

From: Wen S. Shen, Legislative Attorney.

Subject: Effect of S. 1129 on Certain Federally Funded Health Programs and Private Health Insurance.

Pursuant to your request, this memorandum discusses the legal effect of S. 1129, the Medicare for All Act of 2019 (MFAA or Act) on various public and private health care programs or plans. Specifically, the memorandum analyzes whether the MFAA would authorize the following programs or plans to continue in their current form:

Medicare (including Medicare Advantage and Part D);

Medicaid (including the Children's Health Insurance Program);

TRICARE;

Plans under the Employee Retirement Income Security Act; and

Individual, Small and Large Group Market Coverage.

For reasons discussed in greater detail below, the Program created by the MFAA would, following a phase-in period and with some limited exceptions, largely displace these existing federally funded health programs as well as private health insurance. This memorandum begins with a description of the key provisions of the MFAA before turning to its legal effect on the programs and plans that are the subject of your request.

MEDICARE FOR ALL ACT OF 2019

The MFAA aims to establish a national health insurance program (Program) that would "provide comprehensive protection against the cost of health care and health-related services" in accordance with the standards set forth under the Act. Specifically, under the Program, every resident of the United States, after a four-year phase-in period following the MFAA's enactment, would be entitled to have the Secretary of Health and Human Services (Secretary) make payments on their behalf to an eligible provider for services and items in 13 benefits categories, provided they are "medically necessary or appropriate for the maintenance of health or diagnosis, treatment or rehabilitation of a health condition." Except for prescription drugs and biological products, for which the Secretary may set a cost-sharing schedule that would not exceed \$200 annually per enrollee and meet other statutory criteria, no enrollee would be responsible for any cost-sharing for any other covered benefits under the Program. The bill would direct the Secretary to develop both a mechanism for enrolling existing eligible individuals by the end of the phase-in period and a mechanism for automatically enrolling newly eligible individuals at birth or upon establishing residency in the United States.

All state-licensed health care providers who meet the applicable state and federal provider standards may participate in the Program, provided they file a participation agreement with the Secretary that meets specified statutory requirements. The Secretary would pay participating providers pursuant to a fee schedule that would be set in a manner consistent with the processes for determining payments under the existing Medicare program. Participating providers would be prohibited from balance billing enrollees for any covered services paid under the Program, but providers would be free to enter into private contracts with enrollees

to provide any item or service if no claims for payment are submitted to the Secretary and the contracts meet certain statutory requirements.

With respect to payment for covered pharmaceuticals, medical supplies, and medically necessary assistive equipment, the Secretary would negotiate their payment rate annually with the relevant manufacturers. The bill would further direct the Secretary to establish a prescription drug formulary system that would encourage best practices in prescribing; discourage the use of ineffective, dangerous, or excessively costly medications; and promote the use of generic medications to the greatest extent possible. Off-formulary medications would be permitted under the Program, but their use would be subject to further regulations the Secretary issues.

With respect to the Program's administration, the bill would authorize the Secretary to develop the relevant policies, procedures, guidelines, and requirements necessary to carry out the Program. The Secretary would also establish and maintain regional offices—by incorporating existing regional offices of the Centers for Medicare & Medicaid Services where possible—to assess annual state health care needs, recommend changes in provider reimbursement, and establish a quality assurance mechanism in the state aimed at optimizing utilization and maintaining certain standards of care.

To fund the Program, the bill would create a Universal Medicare Trust Fund. Funds currently appropriated to Medicare, Medicaid, the Federal Employees Health Benefits Program (FEHBP), TRICARE, and a number of other federally funded health programs would be appropriated to the new fund.

The MFAA also includes a number of other provisions related to the administration of the Program, including an enforcement provision aimed at preventing fraud and abuse, provisions relating to quality assessment, and provisions concerning budget and cost containment.

EFFECT OF THE MFAA ON CERTAIN FEDERALLY FUNDED HEALTH PROGRAMS AND PRIVATE HEALTH INSURANCE

Federally Funded Health Programs

The federal government currently funds a number of health programs, including (1) Medicare, which generally provides health insurance coverage to elderly and disabled enrollees, (2) Medicaid, which is a federal-state cooperative program wherein states receive federal funds to generally provide health benefits to low-income enrollees, (3) the Children's Health Insurance Program (CHIP), which is a federal-state cooperative program that provides health benefits to certain low-income children whose families earn too much to qualify for Medicaid but cannot afford private insurance; (4) the FEHBP, which generally provides health insurance coverage to civilian federal employees, and (5) TRICARE, which provides civilian health insurance coverage to dependents of active military personnel and retirees of the military (and their dependents). Following an initial phase-in period, the MFAA would prohibit benefits from being made available under Medicare, FEHBP, and TRICARE while also prohibiting payments to the states for CHIP. These payment prohibitions would effectively terminate these programs in their current form. This reading is confirmed by §701(b)(2) of the MFAA, which redirects funding for these programs to the national Program.

With respect to Medicaid, the MFAA would significantly limit its scope. After the MFAA's effective date, Medicaid would only continue to cover services that the new national Program would not otherwise cover.

Thus, Medicaid benefits for institutional long-term care services (which are not among the 13 categories of covered services under the MFAA) and any other services furnished by a state that the Program would not cover, would continue to be administered by the states. The bill would direct the Secretary to coordinate with the relevant state agencies to identify the services for which Medicaid benefits would be preserved and to ensure their continued availability under the applicable state plans.

PRIVATE HEALTH INSURANCE

Currently, private health insurance in the United States consists of (1) private sector employer-sponsored group plans, which can be self-insured (i.e., funded directly by the employer) or fully insured (i.e., purchased from insurers), and (2) group or individual health plans sold directly by insurers to the insured (both inside and outside of health insurance exchanges established under Section 1311 of the Affordable Care Act). The MFAA would prohibit employers from providing, and insurers from selling, any health plans that would "duplicate[] the benefits provided under [the MFAA]." Given that the benefits offered under many existing private health plans would likely overlap with—i.e., be the same as—at least some of the benefits within the Program's 13 categories of covered benefits, those existing health plans would likely "duplicate" the benefits provided under the MFAA. Thus, this prohibition of duplicate coverage would effectively eliminate those existing private health plans. Employers and insurers, however, would be allowed to offer as benefits or for sale supplemental insurance coverage for any additional benefits not covered by the Program. As a result, employers and insurers could offer, for instance, coverage for institutional long-term care services, which are not among the 13 categories of covered services.

Mr. BARRASSO. Mr. President, this report details how the bills cut off funding.

The CRS memo concludes: These payment prohibitions would effectively terminate all of those programs I mentioned in their current form.

The Congressional Research Service finds that Medicare for All actually terminates Medicare in this country. So Democrats want to turn Medicare, currently for 60 million seniors, into Medicare for None. It will become Medicare for None, not Medicare for All. Plus, 22 million people would lose Medicare Advantage. I know many of my patients who signed up for Medicare Advantage because there are advantages to doing it—coordinated care, working on preventive medicine. There are reasons for signing up for Medicare Advantage. That would all be gone under the one-size-fits-all approach that the Democrats are proposing.

That is not all. This report says the Sanders bill ends Federal employee health insurance. There are more than 8 million Federal workers, families, and retirees who rely on this Federal Employee Health Benefits Program.

The Congressional Research Service says that this bill, sponsored by over 100 Members who are Democrats in the House of Representatives and sponsored by a number of Democrats in this body, will abolish TRICARE, the insurance for the military. More than 9 million military members, their families,

and retirees rely on TRICARE for their healthcare.

The report says the bill ends the Children's Health Insurance Program. Nine million of our Nation's children rely on the CHIP program.

Interestingly, ObamaCare would end as well, according to the CRS report. After less than a decade, Democrats want to repeal and replace their failed ObamaCare healthcare law with a one-size-fits-all system.

Again, the Congressional Research Service says the bill bans private health insurance. One hundred eighty million people get their insurance through work.

To sum up, hundreds of millions of American citizens—American citizens—stand to lose their insurance, and I believe that is just the start of the pain for American families. In the new system, we would all be at the mercy of Washington bureaucrats. That means we would be paying more to wait longer for worse care—pay more to wait longer for worse care. The Democrats' massive plan is expected to cost \$32 trillion. That is trillion with a "t." That is a 10-year pricetag.

Guess who is going to pay for that mind-boggling bill—of course, every American taxpayer. Senator SANDERS admitted in the Democratic debate the other night that his proposal would raise taxes on middle-class families. His proposal will raise taxes, he said, on middle-class families.

In fact, even doubling our taxes wouldn't cover the huge cost of what they are proposing. So Washington Democrats are planning to drastically cut payments to doctors, nurses, hospitals, and to people who are providing care. The bureaucrats would ration care, restrict care—the care you get that you need—and it would be restricted in terms of treatment as well as technology. People would lose the freedom to choose the hospital or doctor they want.

As a doctor, I am especially concerned about the impact on patient care. Patients could wait weeks, even months, for urgently needed treatment. Keep in mind care delayed is often care denied. So the Democrats' grand healthcare vision is to force you to pay more to wait longer for worse care.

As a Senator and a doctor, of course, I want to improve your care, make it less costly. You should get insurance that is appropriate for you and affordable. You should be free to make your own medical decisions. That is what it is like in America.

No question, healthcare needs to be more affordable, and Republicans are working to lower costs without lowering standards. To me, that is the big difference. Democrats are proposing the reverse. Their plan would lower your standard of care and raise your costs. Democrats can keep campaigning hard left on healthcare. That is where they are headed.

Republicans are going to stay focused on real reforms that promote more af-

fordable healthcare, cheaper prescription drugs, protections for patients with preexisting conditions, and, of course, the end of surprise medical bills. President Trump recently took Executive action that increases price transparency to lower the costs that patients pay.

You just need to know the facts about the Democrats' one-size-fits-all healthcare. Don't let far-left Democrats fool you. Radical Democrats want to take away your current healthcare. There would be no more Medicare or private plans, just a one-size-fits-all Washington plan.

Why pay more to wait longer for worse care? Instead, let's give patients the care they need from a doctor they choose at lower costs. That is our goal. That is our objective, and that is what we are going to accomplish.

I yield the floor.

The PRESIDING OFFICER (Mr. ROMNEY). The Senator from Illinois.

Mr. DURBIN. Mr. President, I ask unanimous consent to speak as in morning business.

The PRESIDING OFFICER. Without objection, it is so ordered.

PRESCRIPTION DRUG COSTS

Mr. DURBIN. Mr. President, just a few minutes ago, four young people from the State of Illinois visited my office. They were a variety of different ages, from 10 years of age to the age of 17. They all came because they had a similar life experience, and they wanted to share it with me. Each one of them had been diagnosed with type 1 diabetes.

Ten-year-old Owen from Deerfield told a story—the cutest little kid; great reader; read me a presentation that he put together—and the young women who were with him all talked about how their lives changed when they learned at the age of 7 or 8 that they had type 1 diabetes. For each one of them, from that point forward, insulin became a lifeline. They had to have access to insulin, and they had to have it sometimes many times a day, in the middle of the night. It reached a point where, through technology, they had continuous glucose monitoring devices and pumps that were keeping them alive, but every minute of every day was a test to them as to whether they were going to get sick and need help.

It was a great presentation by these young people, whose lives were transformed, and their parents, who were hanging on every word as they told me their life stories.

They brought up two points that I want to share on the floor this afternoon. The first is the importance of medical research. As one young woman said—she is about 17 now. She has lived with this for 8 or 9 years. She said she is a twin, and her brother told her when she was diagnosed that he hated the thought that, as an old woman, she would still be worried about her insulin every single day. She said: I told my brother "We are going to find a cure before I am an old woman."

Well, I certainly hope that young girl is right, but she will be right only if we do our part here on the floor of the Senate and not just give speeches. What we have to do is appropriate money to the National Institutes of Health. It is the premier medical research agency in the world.

We have had good luck in the last 4 years. I want to salute two of my Republican colleagues and one of my Democratic colleagues for their special efforts. For the last 4 years, Senator ROY BLUNT, Republican of Missouri; Senator LAMAR ALEXANDER, Republican of Tennessee; and Senator PATTY MURRAY, Democrat of Washington, have joined forces—I have been part of that team too—to encourage an increase in medical research funding every single year, and we have done it.

The increase that Dr. Collins at NIH asked for was 5 percent real growth a year. That is 5 percent over inflation. Do you know what we have done in 4 years? NIH has gone up from \$30 billion to \$39 billion. Dramatic. A 30-percent increase in NIH research funding.

We are going to have a tough time with this coming budget, as we have in the past, but I hope we really reach a bottom line, as Democrats and Republicans, that we are committed to 5 percent real growth in medical research every single year so that we can answer these young people who come in dealing with diabetes, those who are suffering from cancer, heart disease, Alzheimer's, Parkinson's—the list goes on and on—that we are doing our part here in the Senate; that despite all the political battles and differences, there are things that bring us together, and that should be one.

The second point they raised—one of the young girls there, Morgan of Jerseyville, started telling me a story about the cost of insulin. As she was telling the story about the sacrifices being made by her family to keep her alive, she broke down and cried. What she was telling me—her personal experience, her family experience—was something that every family with diabetes knows: The cost of insulin—charged by the pharmaceutical companies—has gone up dramatically, without justification, over the last 20 years.

In 1999, one of the major insulin drugs—called Humalog, made by Eli Lilly—was selling for \$21 a vial. That was 20 years ago. In 1999, it was \$21 a vial. The price today is \$329 a vial. What has caused this dramatic increase? There is nothing that has happened with this drug. It is the same drug. And, I might add, Eli Lilly of Indianapolis, IN, is selling the same insulin product—Humalog—in Canada for \$39. So it costs \$329 in the United States and \$39 in Canada.

These families told me they were lucky to have health insurance that covered prescription drugs. That sounds good, except they each had large copays—\$8,000 a year. And what it meant was that for this young girl, this beautiful little girl who was in my office and who has juvenile diabetes,

they would spend \$8,000 a year at the beginning of the year for 3 months of insulin before the health insurance kicked in and started paying for it. Of course, there are families who aren't so lucky—they don't have health insurance to pay for their drugs.

So what are we going to do about it? It happens to be something the Senate is supposed to take up. We are supposed to debate these things and decide the policy for this country. We will see. Very soon, we will have a chance. A bill is coming out of the Health, Education, Labor, and Pensions Committee, and we will have a chance to amend it on the floor and to deal with the cost of prescription drugs. I will have an amendment ready if my colleagues want to join me—I hope they will—on the cost of insulin, and we will have a chance if Senator MCCONNELL, the Republican leader, will allow us—it is his decision. We will have a chance to decide whether these kids and their families are going to get ripped off by these pharmaceutical companies for years to come.

It isn't just insulin; it is so many other products. It is time for us to stand up for these families and their kids, to put money into medical research, and to tell pharma once and for all: Enough is enough. Insulin was discovered almost 100 years ago. What you are doing in terms of increasing the cost of it for these families is unacceptable and unconscionable.

BORDER SECURITY

Mr. President, in the last 2½ years of this administration, we have seen an incredible situation when it comes to immigration and our border. We have seen, unfortunately, some of the saddest and most heartbreaking scenes involving children at the border between the United States and Mexico.

The pattern started with the President's announcement shortly after he was sworn in that he was imposing a travel ban on Muslim countries. That created chaos at our airports and continues to separate thousands of American families.

Then the President stepped up and repealed DACA, the Executive order program created by President Obama that allowed more than 800,000 young immigrants to stay in this country without fear of deportation and to make a life in the only country many of them had ever known.

Then the President announced the termination of the Temporary Protected Status Program, a program we offer—and have throughout our modern history—for those who are facing oppression or natural disaster in their countries. President Trump announced that he was going to terminate it for several countries, affecting the lives of 300,000 immigrants.

Then came the disastrous separation of thousands of families at the border—2,880 infants, toddlers, and children separated from their parents by the Government of the United States. This zero-tolerance policy finally was re-

versed by President Trump after the public outcry against it.

Then what followed was the longest government shutdown in history over the President's demand that he was going to build a border wall, even at the cost of shutting down the Government of the United States for 5 weeks.

We've also seen the tragic deaths of 6 children apprehended at the border and 24 people in detention facilities in the United States.

The President then announced that he was going to block all assistance to the Northern Triangle countries—El Salvador, Guatemala, and Honduras, the source of most of the immigrants who come to our border—and that he would shut down the avenues for legal migration, driving even more refugees to our border.

Now, on President Trump's watch, we have an unprecedented humanitarian crisis. We have seen that crisis exemplified by the horrifying image of Oscar Alberto Martinez Ramirez and his 23-month-old daughter, Valeria, who fled El Salvador and drowned as they tried to cross the Rio Grande 2 weeks ago.

We have seen this crisis play out in the overcrowded and inhumane conditions at detention centers at the border.

In April, I visited El Paso, TX. What I saw in the Border Patrol's overcrowded facilities was heartbreaking.

In May, I led 24 Senators in calling for the International Committee of the Red Cross and the inspector general of the Department of Homeland Security to investigate our Border Patrol facilities. I never dreamed that I would be asking the International Red Cross to investigate detention facilities in the United States. They do that, but usually you are asking them to look into some Third World country where inhumane conditions are being alleged.

After being in El Paso, after seeing what is going at our border, I joined with 23 other Senators in asking the International Red Cross to investigate the U.S. detention facilities.

Later that same month, the inspector general of the Department of Homeland Security released a report detailing the inhumane and dangerous overcrowding of migrants at the El Paso port of entry. The Inspector General's Office found that overcrowding is "an immediate risk to the health and safety" of detainees and DHS employees.

One week ago, the Inspector General's Office issued another scathing report, this time about multiple Border Patrol facilities in the Rio Grande Valley. The Inspector General's Office asked the Department of Homeland Security to take immediate steps to alleviate the dangerous overcrowding and prolonged detention. They stated: "We are concerned that overcrowding and prolonged detention represent an immediate risk to the health and safety of DHS agents and officers, and to those detained."

Congress recently passed legislation 2 weeks ago that included \$793 million in

funding to alleviate overcrowding at these CBP facilities and other funding to provide food, supplies, and medical care to migrants. The bill also includes critical funding for the Office of Refugee Resettlement to care for migrant children.

We must now make sure that this money is spent effectively by the Trump administration. We gave them over \$400 million in February, and they came back to us within 90 days and said: We are out of money. I would like to know how they are spending this money, and I want to make sure it is being spent where it is needed.

There is a gaping leadership vacuum at the Trump administration's Department of Homeland Security. Think of this: In 2½ years, there have already been four different people serving as head of that Department. Every position at the Department of Homeland Security with responsibility for immigration or border security is now being held by a temporary appointee, and the White House refuses to even submit nominations to fill these positions.

Two weeks ago, I met with Mark Morgan, one of those temporary appointees. In May, President Trump named him Acting Director of U.S. Immigration and Customs Enforcement. Mr. Morgan was asked at that time to carry out the mass arrests and mass deportations of millions of immigrants the President had threatened by his infamous tweets.

Shortly before I met with Mr. Morgan to ask him about the mass arrests and mass deportations, there was a change. They took him out of that position and named him Acting Director of U.S. Customs and Border Protection. He went from internal enforcement to border enforcement. Now he is in charge of solving the humanitarian crisis that President Trump has created at our border.

The Trump administration can shuffle the deck chairs on this Titanic, but we must acknowledge the obvious: President Trump's immigration and border security policies have failed. Tough talk isn't enough. We need to do better.

This morning, I met with Dr. Goza, the president of the American Academy of Pediatrics. She came to give me a report about her visit to several border facilities that has been well documented and reported in the press. She said that it was hard for her, as a doctor for children, to see these things and realize they were happening in the United States.

Yes, children are being held in caged facilities with wire fences and watchtowers around them, some of them very young children. As a pediatrician, she told me those things have an impact on a child—on how that child looks at the world and how that child looks at himself.

She said that she took a lot of notes as she went through these facilities, but it wasn't until she got on the airplane on the way home that she read

through them. She said: Then I started crying. I am supposed to be a professional who can take this, but I couldn't imagine what we were doing to these children at the border. There just aren't enough medical professionals there—not nearly enough.

The United States is better than that. We can do better than that. We can have a secure border and respect our international obligations to provide a safe haven to those who are fleeing persecution, as we have done on a bipartisan basis—Democrats and Republicans—for decades.

I stand ready, and I believe my party stands ready, to work with Republicans on smart, effective, and humane solutions to the crisis at our border. I suggest that the following be included:

Crack down on traffickers who are exploiting immigrants. That is unacceptable.

Provide assistance to stabilize the Northern Triangle countries. That is long overdue.

Provide in-country processing and third-country resettlement so that migrants can seek safe haven under our laws without making the dangerous and expensive trek to our border.

Eliminate the immigration court backlog so that asylum claims can be processed more quickly.

We have authorized more than 100 immigration court judges, and this administration can't find people to fill them. They want more judges. They have authority to hire 100 more, and they have been unable to do it.

We need to ensure that children and families are treated humanely when they are in the custody of the U.S. Government.

Eventually, the history of this period will be written, and there will be accountability, not just for the officials in government but for all of us—those of us in the Senate and the House and those in journalism and other places. We are going to have to answer for the way these people have been treated. Whether or not they qualify for legal status in the United States, I hope we can hold our heads up high and say that, at least from this point forward, we are going to show them that we are humane and caring people. No matter where they come from, no matter how poor they may be, we will take care that children are treated in a merciful way and a compassionate way; that the adults are given appropriate opportunities to exercise whatever rights they have under the laws of our country; and that at the end of the day we can hold our heads high because we have done this in a fashion consistent with the values of the United States of America.

We haven't seen it yet. It is time for the President to acknowledge that get-tough, bizarre tweets just aren't enough. We have to have a policy that makes sense to bring stability to our border.

I yield the floor.

The PRESIDING OFFICER. The Senator from Iowa.

PRESCRIPTION DRUG COSTS

Ms. ERNST. Mr. President, I recently received a letter from a gentleman living in Cedar Falls, IA, who suffers from Parkinson's disease. As I speak, he is going without his \$1,450-per-month LYRICA prescription in order to keep a roof over his head. That is right, folks. He must choose between making a mortgage payment and getting his prescription.

Here is another story a woman from Davenport, IA, shared with me. Last October, she was able to get a 3-month supply of blood pressure medication for \$17, but when she went to the pharmacy for her refill in late December, she was told the price had nearly tripled to \$55. She wrote to me and said:

Thinking this was a mistake, I refused the refill and checked online about the change in price and found I couldn't get it cheaper anywhere else. So I went back in ten days and thought I would just have to pay the new cost [which was \$55]. In that time . . . the prescription had gone up to \$130!

Whether I am talking to folks back home in my townhalls and other events on my 99 County Tour or in meetings right here in Washington, DC, the cost of prescription drugs is the No. 1 issue I hear about from Iowans. Every day, I hear stories just like these about the outrageous costs associated with their prescription medications.

For too long, hard-working Iowans have borne the brunt of skyrocketing prescription drug prices. Stories like the man from Cedar Falls and the woman from Davenport have become the norm. We have to change that, and that is exactly what we are doing here in the Senate.

We have been hard at work in advancing bills to drive down drug prices, increase competition, and close costly loopholes that are being exploited by those bad actors. I am proud to lead on three such bills that were recently approved in committee.

First, I have teamed up with Senator COTTON on a bill that aims to eliminate an egregious loophole in the patenting process. This loophole allows drug companies to take advantage of the well-intentioned concept of sovereign immunity for Native American Tribes in order to dismiss patent challenges and unfairly stifle competition.

Our legislation would put an end to this manipulative practice and actually provide Iowans with access to cheaper options for their prescription drugs. That is not all we are doing in the Senate to make more low-cost generic drugs available to folks in Iowa. We have also been working across the aisle on a bipartisan bill that would put a powerful check on drug companies seeking to keep generics off the market.

The bill would empower the makers of generic drugs to file lawsuits against brand-name manufacturers if they fail to provide required resources, such as drug samples, needed for generics to clear the regulatory process. In turn, we would see cheaper alternatives available for my folks in Iowa.

I am also working with my fellow Iowan, Senator GRASSLEY, on a bill that focuses on the middlemen behind some of the prescription drug price hikes we have seen recently. The bill would direct the Federal Trade Commission to examine anti-competitive behavior in the prescription drug market. As mergers push drug prices higher and higher, this bill will be instrumental in helping Congress develop policies to increase competition and lower those costs for both patients and our taxpayers.

Make no mistake. The rising cost of prescription drugs is an issue that significantly impacts hard-working Iowans. We in Congress have a responsibility to take action, to give folks a voice, and to make sure no family is ever forced to choose between making a mortgage payment and purchasing their medications.

That is what we are doing. We have some great bills in the Senate—bills from both Republicans and Democrats—that can help lower those drug prices, increase competition, and close loopholes. Let's build on this effort and continue working together in a bipartisan way to get these bills and others across the finish line and signed into law. Iowans are counting on us.

I yield the floor.

The PRESIDING OFFICER (Mr. PERDUE). The Senator from Florida.

Mr. SCOTT of Florida. Mr. President, as is now obvious to everyone, ObamaCare made healthcare even more expensive. Premiums are up. Copays are up. Deductibles are way up. ObamaCare has been a disaster, and even the Democrats are admitting it.

Let's all remember, ObamaCare was sold and based on a bunch of lies. You didn't get to keep your doctor, your health plan, and your premiums didn't go down.

The Democrats want Medicare for All, which will absolutely ruin the Medicare system and throw 150 million people off of the employer-sponsored health insurance they like. That would be a disaster. There is something we can do and must do right now to help American families: We must lower prescription drug costs.

This is very personal to me. I grew up in a family without healthcare. My mom struggled to find care for my brother who had a serious disease. Eventually she found a charity hospital 4 hours away for his treatment. I remember asking my mom how much lower drug costs would have to be for her to consider changing pharmacies. Without missing a beat, she said: a dollar.

This story is not uncommon. All over my State I hear the same thing: Drug prices are rising, and we are having trouble affording the lifesaving medication we need.

I recently met Sabine Rivera, a 12-year-old from Naples, FL, who was diagnosed with type 1 diabetes more than 2 years ago. She is 12 years old, and she is already worried about how she will

afford the rising cost of insulin—something no 12-year-old should ever have to stress about.

Patients want to shop for better coverage and lower costs, but too often they can't or don't know how. At the same time, pharmaceutical companies are charging low prices for prescription drugs in Canada, Europe, and Japan but charging American consumers significantly more. Why? Because for too long politicians have done nothing.

American consumers are subsidizing the cost of prescription drugs in Europe and Canada and all over the world. Why should we be doing that? That certainly is not putting America first, and that is not putting American families first. That is why I am working with President Trump and Republicans and Democrats in Congress to fix this problem.

I recently introduced the America First Drug Pricing Plan with Senator JOSH HAWLEY to take real steps to lower costs for patients and put the consumers back in charge of their healthcare decisions. Part one of my bill focuses on transparency.

First, pharmacies must inform patients what it will cost to purchase drugs out of pocket instead of using their insurance and copays. If patients choose to pay out of pocket, which is sometimes cheaper, the total cost would be applied to their deductible.

Second, insurance companies should, and must, inform patients of the total cost of their prescription drugs 60 days prior to open enrollment. This allows patients to be consumers and shop around for the best deal.

Finally, my bill would simply require that drug companies cannot charge American consumers more for prescription drugs than the lowest price they charge consumers in other industrialized nations.

I have found that provision to be controversial in Washington. Do you know where it is not controversial? Everywhere else. In Tampa and Orlando, Miami and Panama City, all over Florida, this just makes sense. I don't spend a lot of time outside of Florida, but I would wager and say that across the country my bill would make a lot of sense too.

Why would we as American consumers, who make up 40 percent of the market for prescription drugs, pay two to six times more for drugs than consumers in Europe or Canada or Japan? That needs to change. My bill takes real steps to change this, and I believe it should have bipartisan support.

I also led seven of my colleagues in a letter to pharmaceutical companies asking them to work with us on solutions to lower the cost of prescription drugs. We are still waiting to hear back.

American consumers are facing a crisis of rising drug costs, and we can't wait any longer. I will not and cannot accept the status quo of rising drug costs. We need to get something done this year, and I am fighting every day to make sure we do.

I yield the floor.

The PRESIDING OFFICER. The Senator from West Virginia.

Mrs. CAPITO. Mr. President, I am pleased to join my colleague on the Senate floor to talk about an extremely important topic—that is, lowering the cost of prescription drugs in this country. Just a few weeks ago, on June 20, West Virginia celebrated our 156th birthday. There is plenty to celebrate about West Virginia, from its breathtaking beauty and wonderful families to our kind and hospitable West Virginia spirit.

Unfortunately, West Virginia has its challenges, too, including health challenges. We have some of the highest rates in the Nation for heart disease, diabetes, cardiovascular disease, cancer, and arthritis. While there are many nonpharmaceutical steps people are taking to prevent and control diseases, for many, their prescription medicine is the difference between wellness and illness or even between life and death.

That is why it is so important that West Virginians are able to secure their medications and that we as a Congress make sure they are not paying too much for those medications. Of all the issues that my constituents come to me with—whether it is a phone call, a letter, or casually running into them at the grocery store—this is the issue I hear most about because it is something that affects so many West Virginians' way of life, and it is something that affects them every day. If it doesn't affect them, it affects somebody in their family.

The same can be said for Americans across this country, and that is why it has become one of our Nation's top priorities, one that is shared by Republicans and Democrats and one that is a significant bipartisan focus of this administration and this Congress. It is a far-reaching problem with many different factors contributing to it, and that is why we have to address it on many different fronts.

The chairman of the HELP Committee is here today. He has worked through his committee diligently, and I applaud him for his efforts and look forward to joining him on the floor in support of those efforts.

As we all know, the path a medication takes from the manufacturer to the patient is very complex, with many factors impacting the price a consumer pays. While making changes to this pathway is very important, my constituents really don't care about the pathway. They are more concerned with the total on their bill that their pharmacist is ringing up. That is why I have focused a lot of my personal efforts on the important role that our pharmacists play in lowering drug costs.

In many small towns and rural communities—which is my entire State—pharmacists are the healthcare providers people go to quite regularly, and they are often some of the most trust-

ed, friendly, and welcoming. It is essential that patients, especially seniors, are able to access the local pharmacy.

West Virginians and Americans across the country should be able to trust that their pharmacist is not being restricted about telling them how to get the best prescription drug prices. They need to know they aren't facing higher cost sharing for drugs and being accelerated into the coverage gap or the doughnut hole phase of Medicare Part D due to an overly complicated system of fees and price concessions that nobody really understands—certainly not at the pharmacist's desk.

In order to ensure that seniors have access to a pharmacy of their choice, Senator BROWN and I introduced the Ensuring Seniors Access to Local Pharmacies Act last Congress. We will be reintroducing this bill, which requires that community pharmacists in medically underserved areas be allowed to participate in the Medicare Part D preferred pharmacy networks.

Why is this important? If a local pharmacy is not included in a preferred network, a senior must either switch to a preferred network pharmacy, which could be a lot farther away or less convenient, or pay higher copayments and coinsurance to access their local pharmacy. In some cities and towns, you can find a pharmacy on nearly every corner. In rural areas, that is just not the case, and accessing a preferred pharmacy could require significant time and difficult travel.

Additionally, many seniors rely on their local pharmacies not only to access prescription drugs but also to receive those needed services like preventive screenings and medication therapy management.

As important as access to a local pharmacy is, it is also essential that patients can trust their pharmacists to let them know which payment method provides the most savings when purchasing their prescription drugs.

I was proud to join Senator COLLINS last year as a cosponsor of the Patient Right to Know Drug Prices Act. This commonsense bill, which the President signed into law in October, bans the use of the pharmacy gag clause. It was hard to believe this still existed. These clauses were put into place by insurers and pharmacy benefit managers, and they prevented our pharmacists from proactively telling consumers that their prescriptions could cost less—less—if they paid out of pocket rather than relying on their insurance plan.

I am also currently working with Senators TESTER, CASSIDY, and BROWN on legislation that would help improve transparency and accuracy in Medicare Part D drug spending. Our bill would reform the application process of pharmacy price concessions, also known as direct and indirect remuneration, or DIR fees, in the Medicare Part D Program. It sounds complicated, but it is driving up the cost of our pharmaceuticals.

This will ensure that our seniors are not facing higher cost sharing for their drugs or, again, being accelerated into the coverage gap. It will also help ensure that local pharmacies are able to stay open. This is critical. We have to keep our local pharmacies open for a vast majority of rural America and have them continue to stay open and continue to serve Medicare beneficiaries and other communities that rely on them. It would provide needed financial certainty for these pharmacies, which are often small businesses.

My colleagues and I hope to see this legislation included in the soon-to-be-released Senate finance package. These are just a few examples of how we are working to lower prescription drug costs.

I have been listening to my colleagues and have heard a lot of other ideas. They are small but much needed steps that can be, and already are, making a real difference in our constituents' lives, but our work is far from over. We have to continue looking at both commonsense and complex solutions to the problem. This is a complex problem. While as a Congress and a country we may not agree on the best way to do that, we do all agree that it is a problem that needs to be solved.

I look forward to continuing to work with Senator ALEXANDER and Senator LANKFORD, who are on the floor here today, and my other colleagues and the administration to find that pathway forward to lowering the cost of prescription drugs.

I yield back.

The PRESIDING OFFICER. The Senator from Tennessee.

Mr. ALEXANDER. Mr. President, I thank the Senator from West Virginia for working to reduce the cost of prescription drugs. That is the question I hear most often in Tennessee: How can I reduce what I pay for out of my own pocket for healthcare costs? The most obvious way to reduce what you pay out of your own pocket for healthcare costs is to reduce the cost of prescription drugs.

Shirley, from Franklin, TN, is one of those Americans who asked me that question. This is what she said:

As a 71 year old senior with arthritis, I rely on Enbrel to keep my symptoms in check. My copay has just been increased from \$95.00 to \$170.00 every ninety days. At this rate I will have to begin limiting my usage in order to balance the monthly budget.

There has never been a more exciting time in biomedical research, but that progress is meaningless if patients can't afford these new lifesaving drugs.

Last month, as Senator CAPITO mentioned, our Senate Health Committee passed legislation by a vote of 20 to 3 that included 14 bipartisan provisions to increase prescription drug competition as a way of lowering generic drug costs and biosimilar drugs that reach patients.

Here is what that includes: The CREATES Act—the Senator from Iowa, Mr.

GRASSLEY, is on the floor. He, Senator LEAHY, and many others have proposed the CREATES Act, which will help bring more lower cost generic drugs to patients by eliminating anticompetitive practices by brand drugmakers. That is in the bill we approved. It also includes helping biosimilar companies speed drug development through a transparent, modernized, and searchable patent database. That was proposed by Senators COLLINS, Kaine, BRAUN, HAWLEY, MURKOWSKI, PAUL, PORTMAN, SHAHEEN, and STABENOW. This legislation we have was approved 20 to 3. There are 55 different proposals by 65 different U.S. Senators—about the same number of Republicans and Democrats—all to reduce healthcare costs.

Here are some other examples. The bill improves the Food and Drug Administration's drug patent database by keeping it more up to date to help generic drug companies speed product development, a proposal offered by Senator CASSIDY and Senator DURBIN.

Another provision is it prevents the abuse of citizens' petitions. These are used to unnecessarily delay drug approvals. This was proposed by Senators GARDNER, SHAHEEN, CASSIDY, BENNET, CRAMER, and BRAUN. President Trump included that in his 2020 budget.

Another provision is it clarifies that the makers of brand biological products, such as insulin, are not gaming the system to delay new, lower cost biosimilars. That came from Senators SMITH, CASSIDY, and CRAMER.

Another provision is it eliminates exclusivity loopholes. These allow drug companies to get exclusivity and delay patient access to less costly generic drugs by just making small tweaks to an old drug. That came from Senators ROBERTS, CASSIDY, and SMITH, which President Trump also proposed in his budget.

Another provision prevents the blocking of generic drugs. This is done by eliminating a loophole that allows a first generic to submit an application to FDA and block other generics from the market. Again, the President included this in his budget.

Another provision in our bill prevents delays of biosimilar drugs by excluding biological products from compliance with U.S. Pharmacopeia standards. That sounds pretty complicated, but what it means is that it could delay patient access and lower the cost of drugs. Again, that is another proposal by President Trump.

Another provision is it increases transparency on price and quality information by banning the kind of gag clauses Senator CAPITO talked about. These are gag clauses in contracts between providers and health plans that prevent patients, plan sponsors, or referring physicians from seeing price and quality information.

Another provision bans pharmacy benefit managers from charging more for a drug than it paid for the same drug.

Instead of remaining stuck in a perpetual partisan argument over ObamaCare and health insurance—and I can guarantee you that is going to continue to go on for a while—we have Senators on that side of the aisle and Senators on this side of the aisle working together to lower the cost of what Americans pay for healthcare out of their own pockets.

Since January, Senator MURRAY and I have been working in parallel with Senator GRASSLEY and Senator WYDEN of the Finance Committee. They are continuing to work on their own bipartisan bill. Last month, the Senate Judiciary Committee also voted to lower the cost of prescription drugs. In the House, the Energy and Commerce, Ways and Means, and Judiciary Committees have all reported out bipartisan bills on the cost of prescription drugs.

As I have mentioned, President Trump and Secretary Azar have been focused on this. Last year, the administration released a blueprint on steps the President would take to lower prescription drugs. Last year, the Food and Drug Administration set a new record for generic drug approvals. Generic drugs can be up to 85 percent less expensive than brand drugs.

So I believe the cost of prescription drugs is an area where Democrats and Republicans in Congress and the administration can find common ground to help Americans reduce the cost of healthcare that they pay for out of their own pockets.

I am very hopeful that our bill, with 55 proposals from 65 Senators, which has been reported to the Senate floor, will be placed by the majority and minority leaders on the Senate floor before the end of the month. We can pass it, the House will do their job, and we can send it to the President to lower prescription drug costs.

I yield the floor.

The PRESIDING OFFICER. The Senator from Oklahoma.

Mr. LANKFORD. Mr. President, I rise to talk to this body again about healthcare and the cost of healthcare. This has been an issue and an ongoing dialogue for a long time around the Senate and around Congress.

It is an issue that was supposedly settled when the Affordable Care Act was passed, but, ironically enough, my Democratic colleagues have now joined Republicans in saying they want to repeal and replace the Affordable Care Act. They are not using the term "repeal and replace"; they are just saying they want to do Medicare for All. Built into that is completely taking out the Affordable Care Act and replacing it with something different.

So, ironically, in some ways, we are in the same spot. We have both come to the same realization that the Affordable Care Act didn't pass—it actually did pass, but it is not working. So now the challenge is what to do with healthcare.

We are now trying to break into pieces what we can actually do together to get this done, beginning with the cost of prescription drugs.

I continue to hear from Oklahomans all over the State about how hard it is to deal with the cost of prescription drugs, how rapidly the costs are increasing, and how sporadic the cost changes really are. They will have a drug that costs a small amount one month and come back a month later and find a dramatic increase for the exact same drug. They can go pharmacy to pharmacy and find a different price for the exact same drug or find that the pharmacy closest to them doesn't offer that drug, and a different pharmacy is the only one that is allowed to have that drug. The complexity is driving them crazy and rightly so.

As we peel back the layers on pharmacy issues, we are finding that the complexity is that cost overruns being built in are too high.

For the past few months, we have looked at every step in the drug process, from the approval to research and development, to try to figure out how the cost is actually getting to the consumer.

Along the way, several things have occurred. The administration has aggressively been approving generics. In fact, the administration has approved a record number of generics. Those generic pharmaceuticals are much less expensive than the branded pharmaceuticals. Many of those have been waiting a very long time at the Food and Drug Administration to actually be approved. The Food and Drug Administration is rapidly getting those out the door, and that helps consumers.

Something else we have done in Congress is to try to address something called the gag clause. The gag clause is one of those things that was behind the scenes that no one knew about except for the pharmacists because, if you came in with your insurance card to pick up your prescription, the pharmacist knew the actual cost you would pay if you paid in cash. Often, you could get that same prescription for less by paying in cash than you could if you were to pay with your insurance card, but the pharmacist was prohibited from actually telling you that. We have addressed that in Congress, in a bipartisan way, to release that gag clause and allow pharmacists to actually tell people their options on pricing.

You might say: That is an absolutely crazy thing. Who put that gag rule in?

Well, the system, and the structure behind the scenes that negotiates all of it, said: If you want to be a pharmacy that sells these drugs, you have to submit to these rules. As we found, the culprit behind many of these issues is a group called pharmacy benefit managers. You will hear it referred to as just the PBMs.

Those pharmacy benefit managers are supposed to negotiate between the

manufacturers and the insurance plans to lower the prices. In many areas, they have lowered prices, but they have also given preferred formulary placement to some of their preferred pharmacies so some pharmacies get that drug and other pharmacies that are competing with them don't get access to that drug. Often, it is the drug that is the highest margin drug only their pharmacies will get and other pharmacies will not.

It has become an anti-competitive piece in the background, when it was supposed to be something that was a highly competitive piece to actually help the consumer.

Unfortunately, PBMs have created one of the most elaborate, complex, and opaque system of pricing, which has a tremendous amount of market distortion and at times has limited patients' access to those drugs. Oftentimes, it is a system they have been able to take advantage of and have created financial incentives to help their bottom line in the process rather than actually help the consumer.

Many consumers have heard about rebates, but they wonder who is getting a rebate. They go to their pharmacy to pay for their drugs, and they are not getting the rebate. There is a rebate going somewhere, just not to them.

Here is the challenge. We are trying to peel back with greater transparency what is happening in the pharmacy benefit manager world and figure out how a small group—it is actually three companies that have 90 percent of the market nationwide, how that middleman in the process actually handles pricing and negotiation.

If you talk to any pharmacist anywhere in the country—and certainly across my great State—who is an independent pharmacist, they will all express their frustration with pharmacy benefit managers and their access to some drugs and not others and the stipulations they deliberately put there to hurt them and help others.

I have joined my colleague Senator CANTWELL in trying to shine some light on the operations of PBMs within the drug chains. Consumers deserve greater transparency. That will help us understand the actual cost of drugs and how those costs are actually getting to consumers or not to consumers in the process. The PBMs need greater examination, and we are finally taking that up to walk through the process.

On the Finance Committee, we are dealing with several issues. Led by Senator GRASSLEY, we are walking through Part B of Medicare, Part D of Medicare, and trying to examine what can be done to help the actual consumer. Our goals are how do we actually increase the options in drugs that are out there, how do we stop the cost increases, and how do we decrease out-of-pocket costs for pharmaceuticals.

In Part B—these are drugs that are often intravenous, but they are done in a hospital setting or in an inpatient setting. As we are working through

that process, we are trying to find the perverse incentives that are built in because, right now, physicians are actually paid a percentage of the medicine they prescribe in Part B. That means if there are three medications that are out there, if a doctor prescribes the highest cost medication, they get a much higher reimbursement. It is not a flat amount. Now, all three may be intravenous, but whichever is the most expensive actually helps the doctor the most. I am not challenging doctors and saying they are always prescribing the branded drugs and the most expensive in the process—that is between the doctor and the patient to determine—but there is no doubt a perverse incentive is built into this; that if they prescribe a more expensive drug, the doctor and his office actually benefit from it. We need to fix that.

In Part D, there are reforms that can actually slow the growth in cost increases and allow people to have greater access to drugs. We are not interested in some kind of formula where we are actually going to decrease the patients' options of what drugs they can actually get in their formulary. That is a great thing about being an American; that we don't have limited formularies. It is very open in the process so Americans can try different pharmaceuticals to see which one works best for them. That is not chosen by government; it is chosen by them and their doctors. The Part D definitely needs a redesign of the benefit structure because right now things like the doughnut hole drive up costs for consumers. We are exploring a way to limit the out-of-pocket costs for beneficiaries so there is a lifetime cap sitting out there. There is an opportunity to know that if I end up with cancer or some other rare disease, I am not going to have these out-of-control costs on the pharmaceutical side and know there is not a doughnut hole waiting for me, where when I get a couple thousand dollars in, I am suddenly going to have a very expensive time. So I can afford my insurance in January, February, and March, but from April to August, I can't afford prescriptions anymore. We can't have that. We have to address those issues because that dramatically affects the out-of-pocket costs.

There are lots of other options we are looking at while working through this process, like the rebates, as I mentioned before, actually getting to the consumer, not to the companies behind the scenes, and dealing with how to take greater advantage of biosimilar drugs—very similar to the generic drugs but just in a different category and at a reduced cost—to allow them to have opportunities to get to those drugs faster. We have to deal with some of the patent issues to make sure drug manufacturers can't hold on to their patents abnormally long so the generics can't actually get out to people or bundle them together to restrict their patents.

We have to end this practice of surprise medical bills. Some folks have no

idea what that is, and other folks know all too well. They look at their insurance. They go to a hospital that is in network, and their doctor is in network. So they go to a hospital that is in network, and they go to a doctor who is in network, but they get a giant bill from an out-of-network anesthesiologist, or the lab is out of network and the hospital is in network, and they get a giant bill from the lab. We are working to end the practice of having labs that are out of network or certain specialists a doctor has sent them to—the patient assumes they are in network, but then they find out that certain individuals who have taken care of them are out of network.

We are also dealing with the issue of air ambulance surprise bills, which has been a great challenge for those folks in rural America who are having to be transferred long distances to get to a hospital and then are getting an enormous bill for an out-of-network air ambulance as a surprise billing. There are ways we can address this to deal with the out-of-pocket costs.

We are focused on areas where we can find agreement and things we can do to work through this process.

There is much to be done in the area of prescription drugs and in the area of in network, out of network, and surprise medical bills. We should be able to find common ground, and I am grateful I am part of this dialogue to help try to find ways we can come together, get this resolved, and get a better situation for American consumers and patients in the days ahead.

With that, I yield the floor.

The PRESIDING OFFICER. The Senator from Iowa.

Mr. GRASSLEY. Mr. President, I want to update my colleagues and the American people about efforts to reduce the cost of prescription medicine.

Last week, our country and the American people celebrated Independence Day, marking 243 years of self-government. As elected representatives, it is our job to make the government work for the people, not the other way around.

For more than two centuries, our system of free enterprise has unleashed American innovation, investment, and ingenuity. Robust competition incubates advances in science and medicine. It leads to lifesaving cures and promising treatments for cancer, Alzheimer's, diabetes, and other debilitating diseases.

However, prescription medicine too often smacks consumers with sticker shock at the pharmacy counter. The soaring prices leave taxpayers with a big tab—particularly under the Medicare and Medicaid Programs—and they weigh heavily on the minds of moms and dads all across the country.

Last week, I held meetings with my constituents in 12 counties across Iowa. The cost of prescription drugs comes up at nearly every single Q-and-A county meeting that I hold. Iowans want to know why prices keep climbing

higher and higher. They want to know why the price of insulin keeps going up and up and up—nearly 100 years after the lifesaving discovery was made. They want to know what can be done to make prescription drugs more affordable.

I am chairman of the Senate Finance Committee, and in that position, I have been working with Ranking Member WYDEN from Oregon on a comprehensive plan to do just that. We have held a series of hearings to examine the drug price supply chain. We are working on a path forward. We are taking care to follow the Hippocratic Oath: "First, do no harm." In other words, let's be sure we don't try to fix what is not broken. Americans don't want to give up high-quality lifesaving medicine. That is why I support market-driven reforms to boost competition and transparency, because with transparency brings accountability and the marketplace working more free of secrecy.

Congress needs to get rid of perverse incentives and fix problems that undermine competition in the drug pricing system, including withholding samples by brand-name pharmaceutical companies, pay for delay, product-hopping, and rebate-bundling. There is too much secrecy in the pricing supply chain. Consumers can't make heads or tails of why they are charged what they pay for their medicine.

President Trump has made reducing drug prices a top priority of this administration, and they have taken several steps under various laws—including even under ObamaCare—to do things that give more freedom to consumers of medicine and on other healthcare priorities.

In another instance, on Monday, the Federal court took a negative move, knocking down a rule that would require drug companies to disclose the price of their drugs in television ads. This is very, very disappointing. Senator DURBIN and I worked on this in the last Congress, and I am going to continue to work with Senator DURBIN to get this job done. Congress must correct what the Federal court said the administration didn't have the authority to do. I disagree with the court, but Congress can fix that. Big Pharma is already required to disclose side effects in their ads. Consumers ought to know what the advertised drug will cost. Today, I call upon my colleagues to climb aboard that effort Senator DURBIN and I will be pursuing.

Let's pass the bipartisan healthcare bills thoughtfully crafted in various committees. The previous three speakers spoke to some of those issues. Let's get these various bills correcting some of these problems over the finish line. Working together, we can drive down the price of prescription drugs without derailing quality and without derailing innovation, all of which saves lives and improves the quality of life for the American people.

I yield the floor.

The PRESIDING OFFICER. The Senator from Indiana.

Mr. BRAUN. Mr. President, Senator GRASSLEY and I attended the rollout of President Trump's Executive order to get the healthcare industry on the move. The chairman of the Finance Committee, the chairman of the Health, Education, Labor, and Pensions Committee, and Senators like me—I am a mainstream entrepreneur—came to the Senate to discuss issues just like this.

I have probably been on the floor more than any other Senator, and every time I do it, I tell the industry: Wake up. I took you on 10, 11 years ago, in my own business, to give good healthcare coverage to my employees. Year after year, it was a litany of, you are lucky your premiums are only going up 5 to 10 percent this year. You have all heard it before. It took risk, and it took some novel thinking, but it can be done. Most entrepreneurs aren't going to put the time I put into it to make it work for my own employees.

When you hear Democrats, Republicans, three or four committees, and the President of the United States talking about a healthcare system that is broken, you should get it through your thick head that there need to be changes made. It shouldn't be coming from Congress, even though it will keep coming.

I think the message is out loud and clear: Wake up and start fixing these things, or you are going to have a business partner whose name is BERNIE SANDERS and another idea of Medicare for All that we would regret once we got it. But, like most things here, like most big problems in this country, we wait too long to solve the issue.

To give you a few things on what led me to be passionate about it, when I had to give up my own company's good health insurance, I had a very generic prescription that I needed to get renewed. There were eight pharmacies in the little town of Jasper, roughly, so I knew I would be able to get quotes. I had no health insurance. I was in between being a CEO of a company and a Senator. I said, I am going to try to see what this is going to be like. I knew it should cost 20 or 25 bucks, maybe a little less.

The first place I called, they stumbled around and couldn't even give me a quote on a common prescription. Finally, after about 3 to 4 minutes, they said \$34.50. I called another place that I thought would be a little quicker on its feet. It took 10 seconds, I got a quote for \$10, and they said: By the way, you can pick it up in 10 minutes.

That is more the way the rest of the economy works, but healthcare consumers have gotten used to not doing any of that heavy-lifting themselves. And believe me, the industry has evolved from Big Pharma, to big hospital chains, to the health insurance industry, which is in the middle of all of it. There are pharmacy benefit managers, and the drug companies give

them \$150 billion worth of rebates, and through their costs and profits, less than half of that makes it to the consumer or to the pharmacy.

The case is out there. We, as Senators and Congressmen on the other side, shouldn't need to be going to the floors of our Chambers to tell you the obvious: If you don't do these things, I don't believe we here—at the speed at which we normally operate—can do it quickly enough for you to save yourselves from that other business plan, which is Medicare for All.

So what do we do to prevent that? No. 1, the industry should be out there doing what all other companies do—be transparent. In any other part of our economy, where do you not ask for and have plenty of information to work with. What does it cost, and what is the quality? I know that where I live, people would drive 60 miles to save 50 bucks on a big-screen TV that costs a thousand bucks.

When I instituted a plan in my own business that encouraged my employees to do that, to have skin in the game, amazing things happened. Every time you pick up the phone or get on the web and look for that comparison, it is kind of hard to find, but it is there. The industry just needs to give more of it and not hide behind a system that has benefitted them. When we created that in my own business, people shopped around for prescriptions and routinely saved 30 to 70 percent, as they do on MRIs, CAT scans, and most other procedures.

I put the time and effort into it. Most CEOs—and you always hear about how employees are happy with their employer-provided insurance. That is because the employers are generally paying for anywhere from 85 to 100 percent of it. So folks working somewhere don't really have skin in the game.

Consumers of healthcare need to do what they do in all other industries and in all other things that they buy—take the time to ask how much it costs, what is the quality, and then the industry get with it so that we can fix the system before the other option actually takes place. There aren't enough CEOs and there aren't enough legislators to, I think, get the industry in shape, and the industry itself knows what these problems are. Get with it before you have a different business partner whom you won't like.

I yield the floor.

The PRESIDING OFFICER. The Senator from Louisiana.

Mr. CASSIDY. Mr. President, I, too, come to speak today regarding pharmaceutical costs and what we can do to make lifesaving medications—and sometimes these medications make our lives a little bit better—more affordable to the average American.

I happen to be a doctor, and I will approach these remarks as a fellow who has seen medicine evolve, who has seen the incredible, positive benefits of pharmaceutical innovation, but also as a doctor who sometimes saw that pa-

tients were unable to afford innovation. The question in my mind is, How do we give the patient the power to afford these innovative medicines, because if she cannot afford them, it is as if the innovation never occurred, and for her, it never did occur. So give the patient power.

Let me make some remarks about pharmaceutical companies. There are some incredible examples.

When I was in medical school, cutting away a part of one's stomach—not the belly but part of the stomach; as I would tell patients, where the food goes after you swallow it—cutting away a part of the stomach because of ulcerative disease was one of the most common procedures done in surgery. Then histamine blockers came along, H2 blockers. Cimetidine was the first. All of a sudden, a surgery that was done multiple times a week was scarcely ever done. Those medicines are now sold over the counter.

This morning, I got a little bit of arthritis, so I took my nonsteroidal anti-inflammatory, which used to be sold by prescription and now is over the counter, along with my H2 blocker, my Pepcid, which used to be sold by prescription but now is over the counter. I take them in the morning, and my back feels better. All of these are medicines that are generic, routine, and we almost—in fact, we indeed take the innovation for granted.

I can go on. I am a liver doctor. Hepatitis C used to be an incurable disease which, in a certain percentage of those affected, would lead to cirrhosis, vomiting blood, liver cancer, and death. Now hepatitis C is cured by taking pills for several weeks. Amazing.

Human immunodeficiency virus, AIDS. When I was in residency, if you got HIV, you died. There was no cure whatsoever. Now people live with it for decades. It is a disease you live with but do not die from. We speak of actually now developing cures for HIV.

That is the promise of a vibrant pharmaceutical industry—people who not only live when otherwise they would have passed away but who also have a better quality of life.

Now, that said, if the patient doesn't have the power, the patient has no leverage in this situation.

I was recently with others in a conversation with the new head of the Congressional Budget Office. The CBO head said: You know, everybody has leverage in the healthcare marketplace except the patient. Everybody has leverage but not the patient.

That is so true. Let me give some examples of how the patient lacks leverage in the pharmaceutical marketplace.

First, I will say, if I go to church—and I do go to church regularly—and there is a BERNIE SANDERS supporter yanking on this lapel and a Donald Trump supporter yanking on this lapel and they are complaining about the same thing, they are talking about either surprise medical bills or the high

cost of drugs. It is something that touches each American, but it doesn't have to be that way.

Consumer Reports did an article over 1 year ago now in which they sent secret shoppers out to retail pharmacies to buy five generic medications, a prescription for each type—again, generic, like the over-the-counter pills I am taking. They went, and they paid anywhere from \$66 to \$900 for the same five drugs. Now, we can assume that the acquisition cost was about 60 bucks, because you could buy it someplace—an independent pharmacy or online—for \$66, but three or four chain pharmacies were charging \$900 for medications that they could acquire for less than \$60.

You could argue, why did the patient pay? Because we have so little advertising, if you will, cost competition, on what a generic medicine would cost. So imagine you have a health savings account, and you are going to buy your prescriptions, and you get charged \$900 for something that should cost \$60. This is the situation in which the patient has no leverage.

By the way, you can ask, why didn't insurance cover it? It is because these patients were posing as uninsured. So the chain pharmacy figured out that it is the uninsured who do not have somebody working on their behalf who are going to be the most ripe for the picking for the high prices. The uninsured are the ones we are going to exploit, the ones paying cash. That is wrong. That is not the patient having the power; it is the patient being used as a victim.

There are other things we can see. One is called evergreening. You have a drug, and you make just a little bit of a tweak to it that doesn't improve its importance or the efficacy of the drug—no clinical benefit—but it extends the intellectual property protections. Now laws that were conceived of and passed by Congress to reward innovation and to encourage creativity are instead being used to stifle competition and to extend patent lives so that we, the patients and the taxpayers, have to pay more—not for innovation but, rather because, somebody figured out how to evergreen it.

So on the one hand, I am going to praise pharmaceutical companies for lifesaving drugs that have meant so much to me, my family, and everyone who is listening today, but I must also ask, why should we reward that which is not innovative but which is merely arbitraging laws meant to encourage innovation? We should not encourage arbitraging laws.

There are other issues, such as patent abuse, where companies file large numbers of patents on parts of their drugs that are not innovative but are byproducts of the production process in order to keep out competition; citizen petitions, which typically come on 6 months before a drug is about to become generic, so all of a sudden, we have all these petitions that must be navigated by the companies seeking to

introduce the generic; and the rebate system, which works to preserve market share but also to increase prices and to keep them high so patients do not benefit from competition.

If we are going to say the patient should have the power in order to have lower prices, we can say right now that the system seems to be aligned against the patient.

What can we do? Well, my office and others have several proposals in the current pieces of legislation going through, such as the so-called real-time benefit analysis. A prescription is ordered for a patient. The patient scans a barcode, and it would say: At this point, with your deductible and your copay, this is how much this drug is going to cost you, but there is a generic available, and you can get that generic instead. That would be a real-time benefit analysis that would save the patient money.

We just talked to the folks at Blue Cross California. They are coming up with so-called gainsharing. If a patient selects a lower cost medication, the patient receives some of the savings that would otherwise have all gone back to the insurance company—another great idea. Senator BRAUN was speaking about the patient having skin in the game. In this case, there will be skin in the game because the patient shares the benefit with the payor for being cost-conscious. That is the patient having the power.

We can also add value-based arrangements, which pharmaceutical companies, to their credit, have proposed. If you are the pharmaceutical company, you get paid only if the medicine works. If the medicine doesn't work, you don't get paid. If it does work, you do. That is a value-based arrangement. We have a bill with Senator WARNER that would do that.

I would also mention attempting to cap Part D exposure. If there is a senior citizen who is in the catastrophic portion of her policy, then you can cap the amount the senior might be exposed to. Under current law, she might be paying 5 percent of \$100,000 worth of medicine. She is taking an essential drug to treat cancer, and she is paying 5 percent of that \$100,000, in addition to 5 percent of the other medications she is receiving. This is something many seniors cannot afford and this is something we as Congress can find mechanisms by which we can cap that exposure but still hold taxpayers whole.

We have to enhance existing markets. As you might guess, my theme is that we should enhance it in terms of giving the patient the power, but we also have to preserve the innovation that has led to the great drugs I spoke about earlier. If all we do is steal intellectual property from the pharmaceutical companies, we will lose these innovative drugs. But, again, we need to have the drugs affordable for the patients. This is the tension—promote innovation but ensure affordability.

We have a number of solutions, such as those I have just mentioned, in the

HELP Committee and now in the Finance Committee. Republicans have solutions. My office continues to work on those. I look forward to working with my colleagues on their implementation.

Mr. President, I yield the floor.

RECESS UNTIL 4 P.M. TODAY

The PRESIDING OFFICER. The Senate stands in recess until 4 p.m.

Thereupon, the Senate, at 3 p.m., recessed until 4:01 p.m. and reassembled when called to order by the Presiding Officer (Mrs. BLACKBURN).

EXECUTIVE CALENDAR—Continued

The PRESIDING OFFICER. The Senator from Washington.

NOMINATION OF JOHN P. PALLASCH

Mrs. MURRAY. Madam President, I come to the floor today to speak about the two nominations we are about to vote on.

The first one is the nomination of John Pallasch to be the Assistant Secretary of Labor overseeing the Employment & Training Administration. This is a critically important role that manages nearly two-thirds of the Department of Labor's budget and our Nation's workforce development programs, which serve over 22 million youth, workers, jobseekers, and seniors who are working to improve their employment opportunities and the lives of their families.

This position is particularly important now as we are seeing the Trump administration work to undermine some of the most crucial programs within the Employment & Training Administration. They are attempting to close Job Corps centers that help train at-risk youth, conserve our natural resources, and provide economic opportunities in rural areas and communities in need. They are also proposing a duplicative, lower quality apprenticeship program that would put workers at risk and give taxpayer dollars to for-profit colleges with very little accountability.

It is clear that the Employment & Training Administration needs a leader now who is knowledgeable, who is experienced, and who is committed to providing workers with the training, support, and benefits they need to succeed in this changing economy. Unfortunately, Mr. Pallasch is not that person. Throughout this nomination process, Mr. Pallasch has shown that he has very limited experience with or understanding of the programs that he would be overseeing.

I am going to vote against this nomination, and I urge my colleagues to do the same.

At this time, I also want to once again reiterate my disappointment in the unprecedented obstruction to Democratic nominees to the Equal Employment Opportunity Commission and the National Labor Relations Board.

Last Congress, Republicans refused to confirm two very highly qualified and respected nominees to additional terms on the EEOC and the NLRB.

Earlier this year, Republicans broke yet another longstanding tradition by confirming a majority nominee to the EEOC without a Democratic pair.

Last week, the White House announced its intention to nominate a bipartisan pair of nominees to the EEOC. After a year of obstruction, I am encouraged by this small step toward bipartisanship and normalcy, but I am here today to urge the White House to formalize these nominations as quickly as possible so that the Senate can confirm them and restore balance to the EEOC.

I strongly urge the White House to nominate a full slate of nominees—Republican and Democrat—to both the NLRB and EEOC.

For those reasons and because of Mr. Pallasch's lack of experience and knowledge about the programs and the policies he would be responsible for, I will vote against his nomination.

NOMINATION OF ROBERT L. KING

Madam President, I also come to the floor today to oppose the nomination of Robert King to be the Department of Education's Assistant Secretary for Postsecondary Education. This position is especially important because so many of our Nation's students are struggling today in higher education.

Over the last few years, I have heard from students who are worried about how they are ever going to afford their textbooks or their rent or even their food, who are worried if their college is preparing them for a good education and if they are going to be able to get a good-paying job and pay off their loans.

First-generation college students are struggling to navigate their financial aid and how to succeed on a college campus for the first time. I am hearing about those worried about being able to get an education without being discriminated against or harassed or assaulted on campus. Those are just a snapshot of the issues students are facing in higher education today.

These challenges are not easy to solve. That is why Chairman ALEXANDER and I are working now to address all of those issues and more in our reauthorization of the Higher Education Act.

As we work to update this critically important law, we cannot ignore the current actions of this Department of Education, which is loosening and eliminating rules that benefit predatory colleges instead of protecting students. Students should have an ally at the Department of Education, someone who understands the challenges they are facing and is committed to helping students succeed.

Among other responsibilities, this Assistant Secretary for Postsecondary Education is responsible for developing rules, for developing a budget and legislative proposals for higher education,

and overseeing our country's quality assurance system of accreditation—a system this Secretary is currently dismantling.

This position is also responsible for programs that help our low-income students and first-generation students and students with disabilities as they prepare for and try to succeed in college and programs that help support minority-serving institutions.

On these issues specifically, Mr. King's record is particularly concerning. Mr. King blamed students for the daunting challenges in higher education today, even saying students are making "bad economic choices." He also refused to answer questions on whether he believes students face systemic barriers in higher education or whether income inequality plays a role in a student's ability to earn a degree. There are students in higher education who are skipping meals today or living in a car. Mr. King would not acknowledge that problem.

Finally, on an issue that is so important to me and one that is imperative to a student's ability to succeed in higher education, Mr. King blamed alcohol and bad judgment—not perpetrators—for the epidemic of sexual assault on college campuses.

I don't believe Mr. King has the right understanding of what students are facing today to be our Nation's next Assistant Secretary for Postsecondary Education. I urge my colleagues who are committed to making higher education within reach for all students to join me in voting against his nomination.

I yield the floor.

The PRESIDING OFFICER. The Senator from Maryland.

U.S. WOMEN'S WORLD CUP VICTORY

Mr. CARDIN. Madam President, Sunday morning, I did what I think most people in this Nation did if they were not in France. I turned on the television to watch the women's national soccer team perform in an incredible showing of talent and commitment on the soccer field. It was an incredible victory for the women's national team, and we are all very proud of what they were able to accomplish. This has been an incredible streak.

Since the Women's World Cup was established in 1991, there have been eight competitions. The United States has won four—and the last two consecutively—beating the Netherlands on Sunday by a score of 2 to 0.

We all congratulate the team. We are very proud. They represented our Nation extremely well. Each of us shares that pride.

As a Maryland Senator, I want to acknowledge Rose Lavelle and Mallory Pugh, who are from the Washington Spirit, which is based in Germantown, MD.

GENDER PAY INEQUALITY

Madam President, this team represents our entire country and the best of our Nation. Their performance highlighted an issue that they raised, which

I hope this body will respond to, and that is the pay inequity based upon gender in this country.

It is shocking that these women soccer players are paid less, receive less in compensation than their male counterparts, even though the women on the world stage have consistently outperformed the men. They have a different pay structure. In 2014, the men's total performance bonus totaled about \$5.4 million, even though they were eliminated in the round of 16. The following year, the women received about one-third less than the men did, even though they were the world champions.

In 2016, this body acted by passing a resolution about the gender pay inequity—to treat all athletes with the respect and dignity they deserve. That was the right thing for us to pass in 2016, and I know my colleague Senator MANCHIN is working on legislation now that will follow that up since, obviously, the soccer league did not respond the way they should have in regard to our women's national soccer team.

In 1963, Congress passed the Equal Pay Act. Yet, when you look at what women earn versus men for comparable work, women are paid 77 cents for every dollar a man earns. It is much worse for minorities. Native Hawaiians and Pacific Islanders versus White males are 62 cents versus a dollar; African-American women are 61 cents versus a dollar for a White male; Native Americans are 58 cents; and Latinos are 53 cents. The wage gap affects not only their current earnings, but it puts women behind men in career earnings of around \$400,000 during the course of their careers, which weakens their ability to save for their retirements. It also means there being fewer Social Security benefits. It affects their ability to be compensated fairly—to have the wealth of this Nation and the security of this Nation.

We can do something to change this. I have already mentioned Senator MANCHIN's efforts and that we could do something specifically in regard to the soccer players, but I urge us to do something a little bit more permanent, and that is to pass the Equal Rights Amendment.

I think Americans would be surprised to learn that in the Constitution of the United States, there is no protection for equal rights for women. Most Americans think we already did that. Any constitution of a democratic State that has been created since the end of World War II has contained constitutional protections for equal rights for women. Many of our State constitutions have provisions for equal rights for women, but our Constitution of the United States does not.

In 1972, the Congress of the United States passed an equal rights amendment to the Constitution to be ratified by the States. Originally, Congress gave the States until 1979. Then Congress extended it until 1982. Now 37 States have ratified the Equal Rights

Amendment. We are one State short of the 38 required for the ratification of a constitutional amendment. Yet there is a problem here. We need to get the 38th State, but we also need to extend the time, for the last amendment that dealt with the pay amendments of Congress that was adopted to our Constitution took over 200 years to ratify.

What we are saying—and I have joined with Senator MURKOWSKI in a bipartisan resolution—is to let us extend the time for the ratification of the constitutional amendment for the equal rights of women so we can really do something meaningful for the gender gap on pay that we have.

In this Congress, we celebrate the 100th anniversary of women's suffrage—since women have had the right to vote. Another concrete way to celebrate that milestone is for us to pass the Equal Rights Amendment. How a nation treats its women economically and socially is a sign of that nation's success. Empowering women is one of the most important things we can do for the future of our country. Whether it occurs on the soccer pitch or in the factories or offices across the country, the wage disparity between American men and women is hurting our Nation.

This morning, the U.S. women's national soccer team rolled down Broadway in a ticker tape parade befitting a world championship, and today or tomorrow, the Senate will likely pass a resolution that will commend the team. These are appropriate ways to celebrate the team. Yet, if we really want to honor the outstanding women who have just brought home the World Cup again, we should join their fight for equal pay for themselves and for all women. Pass S.J. Res. 6, and let's finally ratify the Equal Rights Amendment.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The senior assistant legislative clerk proceeded to call the roll.

Mr. INHOFE. Madam President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

Mr. INHOFE. Madam President, I ask unanimous consent that we begin the 4:30 p.m. vote.

The PRESIDING OFFICER. Without objection, it is so ordered.

CLOTURE MOTION

The PRESIDING OFFICER. Pursuant to rule XXII, the Chair lays before the Senate the pending cloture motion, which the clerk will state.

The senior assistant legislative clerk read as follows:

CLOTURE MOTION

We, the undersigned Senators, in accordance with the provisions of rule XXII of the Standing Rules of the Senate, do hereby move to bring to a close debate on the nomination of Robert L. King, of Kentucky, to be Assistant Secretary for Postsecondary Education, Department of Education.

Mitch McConnell, Roger F. Wicker, John Barrasso, David Perdue, James E.

Risch, Mike Crapo, Roy Blunt, Johnny Isakson, Shelley Moore Capito, Pat Roberts, John Cornyn, John Hoeven, Steve Daines, John Boozman, Thom Tillis, Kevin Cramer, Richard Burr.

The PRESIDING OFFICER. By unanimous consent, the mandatory quorum call has been waived.

The question is, Is it the sense of the Senate that debate on the nomination of Robert L. King, of Kentucky, to be Assistant Secretary for Postsecondary Education, Department of Education, shall be brought to a close?

The yeas and nays are mandatory under the rule.

The clerk will call the roll.

The senior assistant legislative clerk called the roll.

Mr. DURBIN. I announce that the Senator from New Jersey (Mr. BOOKER), the Senator from New York (Mrs. GILLIBRAND), the Senator from California (Ms. HARRIS), the Senator from New Mexico (Mr. HEINRICH), and the Senator from Vermont (Mr. SANDERS) are necessarily absent.

The PRESIDING OFFICER (Mr. CRAMER). Are there any other Senators in the Chamber desiring to vote?

The yeas and nays resulted—yeas 56, nays 39, as follows:

[Rollcall Vote No. 198 Ex.]

YEAS—56

Alexander	Gardner	Perdue
Barrasso	Graham	Portman
Blackburn	Grassley	Risch
Blunt	Hawley	Roberts
Boozman	Hoeven	Romney
Braun	Hyde-Smith	Rounds
Burr	Inhofe	Rubio
Capito	Isakson	Sasse
Cassidy	Johnson	Scott (FL)
Collins	Jones	Scott (SC)
Cornyn	Kennedy	Shelby
Cotton	Lankford	Sinema
Cramer	Lee	Sullivan
Crapo	Manchin	Thune
Cruz	McConnell	Tillis
Daines	McSally	Toomey
Enzi	Moran	Wicker
Ernst	Murkowski	Young
Fischer	Paul	

NAYS—39

Baldwin	Hassan	Rosen
Bennet	Hirono	Schatz
Blumenthal	Kaine	Schumer
Brown	King	Shaheen
Cantwell	Klobuchar	Smith
Cardin	Leahy	Stabenow
Carper	Markey	Tester
Casey	Menendez	Udall
Coons	Merkley	Van Hollen
Cortez Masto	Murphy	Warner
Duckworth	Murray	Warren
Durbin	Peters	Whitehouse
Feinstein	Reed	Wyden

NOT VOTING—5

Booker	Harris	Sanders
Gillibrand	Heinrich	

The PRESIDING OFFICER. On this vote, the yeas are 56, the nays are 39.

The motion is agreed to.

CLOTURE MOTION

The PRESIDING OFFICER. Pursuant to rule XXII, the Chair lays before the Senate the pending cloture motion, which the clerk will state.

The senior assistant legislative clerk read as follows:

CLOTURE MOTION

We, the undersigned Senators, in accordance with the provisions of rule XXII of the

Standing Rules of the Senate, do hereby move to bring to a close debate on the nomination of John P. Pallasch, of Kentucky, to be an Assistant Secretary of Labor.

Mitch McConnell, Roger F. Wicker, John Barrasso, David Perdue, James E. Risch, Mike Crapo, Roy Blunt, Johnny Isakson, Richard Burr, Pat Roberts, John Cornyn, John Hoeven, Steve Daines, John Boozman, Thom Tillis, Kevin Cramer, Shelley Moore Capito.

The PRESIDING OFFICER. By unanimous consent, the mandatory quorum call has been waived.

The question is, Is it the sense of the Senate that debate on the nomination of John P. Pallasch, of Kentucky, to be an Assistant Secretary of Labor, shall be brought to a close?

The yeas and nays are mandatory under the rule.

The clerk will call the roll.

The legislative clerk called the roll.

Mr. DURBIN. I announce that the Senator from New Jersey (Mr. BOOKER), the Senator from New York (Mrs. GILLIBRAND), the Senator from California (Ms. HARRIS), the Senator from New Mexico (Mr. HEINRICH), and the Senator from Vermont (Mr. SANDERS), are necessarily absent.

The PRESIDING OFFICER. Are there any other Senators in the Chamber desiring to vote?

The yeas and nays resulted—yeas 54, nays 41, as follows:

[Rollcall Vote No. 199 Ex.]

YEAS—54

Alexander	Fischer	Paul
Barrasso	Gardner	Perdue
Blackburn	Graham	Portman
Blunt	Grassley	Risch
Boozman	Hawley	Roberts
Braun	Hoeven	Romney
Burr	Hyde-Smith	Rounds
Capito	Inhofe	Rubio
Cassidy	Isakson	Sasse
Collins	Johnson	Scott (FL)
Cornyn	Kennedy	Scott (SC)
Cotton	Lankford	Shelby
Cramer	Lee	Sullivan
Crapo	Manchin	Thune
Cruz	McConnell	Tillis
Daines	McSally	Toomey
Enzi	Moran	Wicker
Ernst	Murkowski	Young

NAYS—41

Baldwin	Hirono	Schatz
Bennet	Jones	Schumer
Blumenthal	Kaine	Shaheen
Brown	King	Sinema
Cantwell	Klobuchar	Smith
Cardin	Leahy	Stabenow
Carper	Markey	Tester
Casey	Menendez	Udall
Coons	Merkley	Van Hollen
Cortez Masto	Murphy	Warner
Duckworth	Murray	Warren
Durbin	Peters	Whitehouse
Feinstein	Reed	Wyden
Hassan	Rosen	

NOT VOTING—5

Booker	Harris	Sanders
Gillibrand	Heinrich	

The PRESIDING OFFICER. On this vote, the yeas are 54, the nays are 41.

The motion is agreed to.

EXECUTIVE CALENDAR

The PRESIDING OFFICER. The clerk will report the nomination.

The legislative clerk read the nomination of John P. Pallasch, of Ken-

tucky, to be an Assistant Secretary of Labor.

The PRESIDING OFFICER. The Senator from Connecticut.

PRESCRIPTION DRUG COSTS

Mr. BLUMENTHAL. Mr. President, I am here to talk about insulin. You may wonder why someone would talk about insulin, given all the weighty and pressing issues we have before us in this Chamber and even more so in the world today. I will not begin to recite them, but insulin for millions of people—in fact, 30 million people in the United States—is a matter of life and death.

Many of us are fortunate because we never have to think about insulin. Our bodies make enough of it to keep us healthy, and we go about our lives without a second thought concerning blood glucose or how our pancreas is functioning, but for those 30 million people—and quite a few of them visited us this morning in our offices, and they were present in the Committee on Aging at our hearing—insulin is a constant worry. It is top of mind. It is always present as an issue for them, in fact, on a daily basis. Patients with diabetes need to carefully monitor and adjust their insulin levels along with managing their physical activities, their diet, stress, pain, sleep levels.

Many of those young people who came to the Committee on Aging today—by the way, I want to thank Senators COLLINS and CASEY for holding that hearing and giving them an opportunity to come to the Nation's Capitol and make us more aware—were wearing monitoring devices, hidden but a constant concern. They depend on insulin as a matter of life and death. It is not a luxury for them. It is not like ice cream or ball games. It is life and death. They are fortunate, too, because they have access to insulin, unlike a lot of people around the world and unlike the whole world, including America, about 100 years ago when diabetes was, in fact, a death sentence, not in a matter of years ahead but right then and there. Diabetes was lethal.

That changed when two researchers, Dr. Frederick Banting and Dr. Charles Best, succeeded in isolating insulin from an animal pancreas in 1921. By the next year, they had collected enough to treat their first patient. He was a 14-year-old boy with diabetes, and he lived miraculously for another year. That was unheard of at the time. It was a tremendous breakthrough—an extra year of life because of their discovery.

So Dr. Banting and Dr. Best filed a patent. They patented their discovery in 1923, and they stated their goal was not to make a lot of money, not to make profit but to make insulin available to the world, make it available to everyone who needed it, make it available to patients, regardless of their means and circumstance. Do you know what they did with that patent? They sold it for \$1—just \$1.

Dr. Banting said: “Insulin does not belong to me, it belongs to the world.”

He was right. Insulin belongs to the world of people, whatever their ages, whatever their circumstances, whatever their means, wherever they live. Certainly, in the greatest country in the history of the world, where that patent, about 100 years ago, was sold for \$1, shouldn't it be affordable and accessible to everyone?

Well, this story has a really discouraging sequel, which is today in real time. The price of insulin has skyrocketed. When I say "skyrocketed," there are different numbers. It doubled, according to one authoritative site, between the years 2012 and 2016. There is another study that says it has risen 10 times in price over just the last several years. Beyond question, it has risen and not just by a little bit but by literally hundreds of dollars for the average American who has to afford it, day in and day out. Those yearly costs are forcing people to choose, literally, between putting food on the table and buying insulin, between paying mortgages and buying insulin, between the kinds of fun that ordinary young people would enjoy and buying insulin.

I know we say this about choices made by Americans, but today in this very Capitol, just steps away, I listened to the parents of Logan and Emma talk to me, along with them, about the real-life consequences of these exploding insulin costs, and it broke my heart. Their experiences are truly heart-breaking and gut-wrenching.

Logan is 12 years old, and he told me in the reception area right here about his diagnosis at 18 months. He talked about the advances in technology around diabetes treatment with extraordinary technological knowledge—impressive not just for someone our age but truly for somebody who is 12 years old. These advances are a tribute to American science, innovation, and ingenuity. They are groundbreaking, but at the end of the day, if his family cannot afford insulin, even the best, most groundbreaking technology means nothing. That is Logan's reality.

His mom told me about sitting in a CVS parking lot and crying while she held a box of pasta because that was all she could afford—pasta for the rest of the week for dinner for that family. It was all she could afford after the insulin costs. For their family, Logan's insulin has cost as much as \$750 a month. That is their deductible. That is what they pay even with insurance. So they have sacrificed not only in terms of what they eat but how they live. He was with Emma, and the two of them are extraordinary ambassadors for the Junior Diabetes Research Foundation, the JDRF, which does so much wonderful work for diabetes patients.

Emma is 15 years old, and her father told me about a similar struggle to afford insulin. In fact, her own dad was diagnosed with type 1 diabetes in his midthirties after Emma's diagnosis. He told me that "the price of insulin is illogical."

There is no reason why the cost keeps going up. In fact, Emma and Logan, both from Connecticut, have become world-wise—not world-weary but world-wise—about the American drug industry. They know those costs are rising without any reason in terms of the cost to the manufacturer. There are costs and prices rising for consumers without any justification in the real cost of producing the insulin they need.

Last week, I held an event on insulin with other diabetes patients to discuss the skyrocketing costs. One of my constituents who spoke was a little bit older than Logan and Emma. Dr. Kathryn Nagel, a physician and resident at Yale University, was also diagnosed with diabetes when she was 18 months old. She is a resident now, training to become a pediatrician, among other specialties. As she put it to me, "Banting would be ashamed of the state of things now." Dr. Banting said, "Insulin does not belong to me, it belongs to the world." He would be outraged and embarrassed by what is happening in America today.

Mr. President, I ask unanimous consent that Kathryn Nagel's full remarks be printed in the RECORD.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

JULY 10, 2019.

I was diagnosed with type 1 diabetes when I was 18 months old. As you can imagine, this was terrifying for my family. But we were lucky. We lived in America, where we had access to the most advanced health care in the world. I was immediately connected to a team of doctors who taught my family everything we needed to know about managing this disease. I had health insurance. Through my insurance, I received insulin and all the other supplies I would need, and my family was able to devote its attention to mastering the regimen required to keep a type 1 diabetic alive.

I was lucky.

I didn't have to worry about where my insulin came from. I didn't have to worry about having to scramble for a new prescription because my insurance company had switched allegiances to a different insulin company. I didn't have to worry about how much it cost because of a high deductible, copay, or god forbid, no insurance at all.

This, unfortunately, is not the reality for many Americans living with diabetes today.

I had this access, not because it is a right granted to all Americans, but because my dad was the employee of a University. When I was in high school, my parents started to impress upon me a vital truth: I must always be employed by someone who would give me good health insurance.

With the help of protections from the Affordable Care Act, and the decision to pursue the path to medicine, I continued to have good access to health insurance. The insulin pricing crisis and healthcare chaos in our country poked through in subtle, but never catastrophic ways for me.

I saw it when I went to fill my prescription, and was told that because of some back door deals my insurance company was no longer covering the type of insulin I had used for the past 20 years. If I wanted to take that type of insulin, I would have to pay hundreds of dollars out of pocket for just one vial. For reference, when I first started this insulin, its list price was \$26 a vial.

I've seen this chaos even more in my practice as a doctor. In medical school we are taught how to treat disease. We are taught which medicines to use and when. In clinical training, however, we learn that that is the easy part. The much harder part, is figuring out how people can get access to the treatments we know they need. We learn to fight with insurance companies, we spend hours on the phone with pharmacies making sure that our patients can actually get the medications we prescribe.

I want to impress upon you, how vital insulin is for a type 1 diabetic to stay alive. This is not something we should take to stay healthy. It is something we must have, every hour of our lives, to stay alive. It is akin to oxygen. For me, it takes just hours without insulin before my body starts developing ketones. Ketones produce an acid byproduct that is toxic to the body, creating an environment where the other organs can no longer function. Without sufficient insulin, it does not take long before a diabetic's heart goes into a fatal arrhythmia, causing an entirely preventable death.

This is what happened to Alec Smith. This is what happened to Kevin Houdeshell. This is what has happened to too many diabetics in this country, many of them quite young, because they lose access to insulin. It happens to too many of them at age 26, when they are left to fend for themselves for health insurance. This should NEVER happen.

I want to tell you about a childhood hero of mine, Frederick Banting. Banting, with his team, discovered insulin in 1921. It is because of Banting I am still alive. But Banting did more than discover insulin. Knowing that it was the difference between life and death, he did what he could to ensure that no greedy company would ever deny people access to insulin. He sold his patent to the University of Toronto for \$1 so that it would remain accessible to everyone. He stated, "Insulin belongs to the world, not to me".

Banting would be ashamed of the state of things now.

It turns out, it's not always such a lucky thing to live in America. Today, 1 in 4 Americans with type 1 diabetes ration insulin due to the cost. In the time since I was diagnosed, the cost of insulin has increased over 1200%. These stats don't even include the huge financial sacrifices people with diabetes are making as copays, deductibles, and premiums rise to meet the sky rocketing costs of insulin and other medications. It does not capture the stress and gut-level fear every one of us holds of not being able to access our insulin or supplies.

We cannot be fighting on a case by case basis for access to what we need to stay alive. We must do better.

Thank you Senator Blumenthal for giving us the opportunities to share our stories. Thank you for fighting for us, and working towards a better future for those of us dependent on insulin to stay alive.

KATHRYN NAGEL, MD.

Mr. BLUMENTHAL. Mr. President, Kathryn Nagel—who will be an extraordinary physician because she has not only a great mind, but she also has a great heart—is absolutely right. Drug companies today have moved far from the outreaching motives of insulin's original discovery. Advancements in biotechnology have allowed manufacturers to make slightly more purified and precise versions of insulin, but it works the same as Dr. Banting's original insulin from the 1920s because that is what our body needs to do its work.

Even incremental changes to an insulin product open up new patent opportunities for manufacturers and companies that have been taking advantage of these loopholes in our patent system for too long at the expense of patients and their families.

Let me give one particularly egregious example. Sanofi manufactures the insulin product Lantus. Sanofi filed a total of 74 patents on Lantus, with 95 percent of those applications happening after Lantus was introduced to the market in the year 2000. That is a variation of insulin—almost 20 years old—protected by 74 patents way beyond the life of the original patent on a medicine discovered 100 years ago by a doctor who said, “Insulin does not belong to me, it belongs to the world.” Sanofi has constructed such an elaborate web and tangle of patents surrounding their product that they could have a competition-free monopoly on their particular version of insulin for 37 years. They are exploiting it relentlessly and tirelessly and inexcusably.

The effect of elaborate patent thickets like Sanofi’s—constructed by companies—are felt by consumers in the form of higher drug prices. It is that simple. Create a monopoly without competition, and the prices can be raised without real limit. Lantus has increased in price 24 percent from 2016 to 2018. In 2 years, there was a 24-percent increase unrelated to the cost of the product. In fact, the overall costs of insulin have doubled in recent years, with patients having paid an average of \$2,864 for insulin in 2012 and \$5,705 in 2016. That is the average out-of-pocket for insulin patient. That is the story I heard from Emma Del Vecchio of Orange and Logan Merwin of Haddam, as earlier today they shared their life-and-death struggle with the cost of insulin.

One more story that has resonated with me over the past few days is from Kristin Whitney Daniels. She is from Shelton, CT.

Mr. President, I ask unanimous consent to have the remarks of Kristen Whitney Daniel and Jonathan Chappell printed in the RECORD.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

JULY 1, 2019.

Thank you, Senator Blumenthal.

My name is Kristen Whitney Daniels and I am the chapter leader for Connecticut’s #insulin4all group, part of the TI International organization. We are a patient-led advocacy group committed to ensuring affordable and equitable access to all diabetes related supplies, including insulin. Insulin is critical for every diabetic—before it’s discovery in 1922, type one diabetes was a death sentence. Today, diabetics can thrive . . . if they have access to insulin.

I was diagnosed with type one diabetes 13 years ago at the age of 15. Being an advocate never crossed my mind when I was diagnosed over a decade ago. Type one diabetes completely took over my life after I was diagnosed. It was like learning a new, complex language and continues to be a relentless disease that requires constant vigilance. So

why would I devote any free time to a disease that has already taken so much?

Why? Because of Alex Smith and Kevin Houdeshell and Micah Fischer and the countless others who lost their lives due to a lack of affordable access to insulin. Because one in four type one diabetics have had to ration insulin, playing a deadly game to survive as pharmaceutical companies continue to unabashedly raise their prices. Because I am the one in four who have been forced to ration their insulin.

My story is a familiar one for the diabetes community. While pursuing my dream internship, I turned 26 and lost my health insurance. I purchased the only health insurance I could afford—a high-deductible plan that cost more than my monthly paycheck and whose monthly payments already consumed 15% of my income. But I had prepared for this time period. I hoarded supplies and medications for months, resorting to underutilizing my supplies. I hoped this would buy me time to work off my deductible. It didn’t; putting any money towards that deductible was like chipping away at an iceberg with a toothpick.

By the time I reached the last of my insulin vials, I knew things were becoming critical. There was no way I could meet my deductible without forgoing housing and food. And at over \$250 a vial, my monthly supply of insulin far-exceeded even my deductible. So, I did what seemed like my only choice: For weeks, I ate significantly less, exercised more, and dangerously started rationing my insulin by cutting my dose and letting my blood sugars rise to unhealthy levels.

Even as those last vials turned to the last few drops, I refused to panic. Surely this is what all the patient assistance programs were meant for. I called my doctor, my pharmacy, my insurance company, the insulin manufacturer, 3 different prescription assistance programs and faced the same answer every time: there was nothing they could do to help because I had insurance. With every call I became increasingly more desperate, finally resorting to begging and pleading.

Didn’t they understand I would be dead in less than 48 hours if I didn’t get my insulin? I wasn’t just frustrated at that moment; I wasn’t just angry . . . I felt insignificant. Like my survival, my life amounted to absolutely nothing.

At the end of the day, none of those avenues helped me. None of those programs pharmaceutical companies tout to the media saved me from death. No, my help came from a last-ditch visit to a government funded community health clinic. There, my insulin was provided to me for \$14—\$2,386 less than at the pharmacy.

The insulin crisis is at a critical juncture in America. We can no longer talk about hypotheticals—diabetics have been and are continuing to die from a lack of affordable access to a drug we need just as much as oxygen. I may not have set out to be an advocate, but I refuse to sit idly by while diabetics suffer at the hands of companies that continue to make exorbitant money off our bodies. Our community will not stop until every diabetic has equal access to insulin. And we will not be silenced when parents, friends, and family continue to bury their loved ones.

Thank you, Senator Blumenthal for sponsoring this bill. This is one bill, of hopefully many, where America chooses to stand with those who have suffered greatly at the hands of pharmaceutical companies.

KRISTEN WHITNEY DANIELS,
CT#insulin4all Chapter Leader.

Hi, my name is Johnathan Chappell and I’m an attorney at the law firm Feldman, Perlstein, and Greene in Farmington, Connecticut.

As far as background goes, I was diagnosed as Type I diabetic in 1999 and started used Humalog insulin in 2001. Just to see what we’re talking about, this is one vial of insulin, for those who do not know. For me, it’s about ten days of life.

It being July 1st, we’re getting close to the Fourth of July—the country’s birthday, if you will. I’ll show you this, which is three vials of insulin in a box, with a rubber band around them, that says “One of three, two of three, three of three.” So that’s about a month of life, for me anyway.

I filled my prescription—I think, smartly—on June 15th. The key date in my life is July 1st. That’s the reset date of my high-deductible plan. So this amount of insulin, again, this being a vial (There are three of them in these boxes. I trust you will trust me)—if I got this today, it would be \$1,008. I got it on June 15th for a \$25 co-pay. There are a lot of words that I could choose, but “insane” seems to be pretty fitting if you ask me.

And we’re here to talk about insulin, but the cost of equipment to put that insulin into my body is also not cheap.

The good news is that I get a lot of gas points at the pharmacy. The bad news is I have to figure out how to feed my family, which includes my wife and three children, and continue to do so. And that, even for me, is quite a task at times.

So what do I do? I try to stockpile as much insulin as I can grab, while my deductible has been exhausted. Like a squirrel before hibernating, I tried to get as much of this as I could before today. So I have about a month or two while I’m okay, or very good. But this is unacceptable. This is not the point of healthcare reform. It has not been addressed, in my opinion.

I thank Senator Blumenthal. With my years of involvement with JDRF I’ve met him and his wonderful office members a number of times. I’m a past president of the JDRF and obviously I can tell you that I’m not the only Type I in Connecticut who is worried about this. I’m fortunate that they still asked me to come and tell my story.

So, again, this was \$25 and, if I went back today, or in two weeks, it would be \$1,008. And it would probably be more expensive, to tell you the truth, because the price of insulin just keeps going up. The minute you drive your car off the lot, it depreciates but, for some reason, insulin has appreciated every day for the past twenty years I’ve been using it. In November, it will be twenty years with Type I diabetes—pretty tightly controlled, but to do that is not cheap.

So again, if Senator Blumenthal’s bill is right near a vote, let’s get it voted on and let’s do what we can to get this issue solved. Short-term, mid-term and forever. I thank Senator Blumenthal and everybody out there for the support.

Mr. BLUMENTHAL. Mr. President, Kristen is the chapter leader of Connecticut #insulin4all and attended the event I mentioned. She was inspired to become an advocate for affordable and equitable access to insulin after facing tough barriers in her own medical treatment. She was forced to become one of the one in four patients with diabetes in the United States who has resorted to insulin-rationing in the face of high drug costs.

Let’s be clear about insulin-rationing. It means reducing the dosage—rationing the consumption—to lower the cost. When we talk about folks who have to cut pills in half or seniors who take a pill every other day instead of every day, that is rationing. That is

what Kristen had to do in the face of these rising drug prices.

In order to pursue her dream internship, Kristen had to purchase the only health insurance she could afford, which was a high-deductible plan whose monthly payments consumed 15 percent of her income. To try to prepare for the realities of this kind of coverage, she had to hoard her insulin and other diabetes supplies for months in advance, deliberately starving her body of the medicine she needed in order to keep her head above water financially.

I have submitted bipartisan legislation that was recently approved unanimously by the Judiciary Committee, along with my colleague Senator CORNYN, that would end these abusive practices surrounding patents—patent-thicketing and product-hopping. You don't need to know the details of those abuses or of our legislation to understand the need for protection and the need for security and safeguards for these kinds of patients—the 30 million who suffer from diabetes and who are paying exploding costs for insulin that are rising exponentially and astronomically for not only insulin but also many other drugs, as we know from listening to our constituents.

All of our colleagues understand the high cost of prescription drugs that continue to plague America across all walks of life. Every day, patients are forced to choose, in fact, between paying for the medicines they need and the needs of their families. Drugs to treat everything from depression, to arthritis, to cancer, and even basic saline solution for IVs have increased in price in recent months. They are not new, wondrous, magic discoveries; they are workhorse medicines. Insulin has been around for 100 years. Many of these other drugs have been around for decades as well. We owe it to Americans.

As citizens and as patients ourselves, we know that these rising prescription prices are ruining families, tearing apart communities, and destroying the basic trust we have in our healthcare system. Nothing is more basic. Healthcare is a right. Prescription drugs should not be available just to the wealthy.

The bill Senator CORNYN and I are hoping this Chamber will pass is just one step toward making prescription drug prices more affordable; making these cures that are America's pride—developed by great researchers and wonderful minds—available to all of our citizens.

Logan Merwin, Emma Del Vecchio, and all of the children in America who suffer from diabetes understand something maybe we don't as well: that insulin is a matter of life and death and that they are alive because they live in the greatest country in the history of the world, where insulin is available to them even at times when it is difficult for their families to afford. They know, too, that with the great advocacy of Kathryn Nagel, Kristin Whitney Dan-

iels, Jonathan Chappell, and others who are taking their cause to America, as well as the JDRF, which is supporting wonderful discoveries, we will be a better country. We will make these prescription drugs affordable.

Insulin will be available to all. Insulin does not belong to me or to you; it belongs to the world. And I hope America will be an example of making insulin belong to the world.

I yield the floor.

I suggest the absence of a quorum.

The PRESIDING OFFICER. The clerk will call the roll.

The bill clerk proceeded to call the roll.

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the order for the quorum call be rescinded.

The PRESIDING OFFICER. Without objection, it is so ordered.

ORDER OF PROCEDURE

Mr. MCCONNELL. Mr. President, I ask unanimous consent that at 11 a.m., Thursday, July 11, the Senate vote on the confirmation of Executive Calendar Nos. 101 and 103 in the order listed. I further ask that if confirmed, the motions to reconsider be considered made and laid upon the table and that the President be immediately notified of the Senate's action; further, that if cloture is invoked on Executive Calendar No. 13, the postcloture time expire at 1:45 p.m.; finally, that the ranking member of the Committee on Environment and Public Works control the time from 1 p.m. until 1:40 p.m.

The PRESIDING OFFICER. Without objection, it is so ordered.

LEGISLATIVE SESSION

MORNING BUSINESS

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the Senate proceed to legislative session for a period of morning business, with Senators permitted to speak therein for 10 minutes each.

The PRESIDING OFFICER. Without objection, it is so ordered.

AFFORDABLE CARE ACT

Mr. CARDIN. Mr. President, today I wish to discuss Americans' access to healthcare and patient protections that are carelessly being threatened by President Trump and his administration, specifically, his decision to not uphold the Patient Protection and Affordable Care Act, ACA, which is the law of the land.

This week, the U.S. Court of Appeals for the fifth circuit began reviewing appeals to a December decision in the case *Texas v. U.S.*, in which the entire ACA was ruled unconstitutional. Republican attorneys general from 18 States argue that the ACA is unconstitutional because our Republican colleagues repealed the individual mandate as part of their 2017 tax bill. In-

stead of defending the ACA and fighting for Americans with preexisting health conditions, President Trump took the unprecedented step of not defending current law, and the Department of Justice revised its position to support full repeal of the ACA, continuing the administration's sabotage of affordable access to healthcare through all avenues of Executive action.

If Republicans successfully overturn the ACA, hundreds of millions of Americans will lose access to affordable healthcare and the monumental consumer protections created through the ACA. This includes the 133 million Americans with preexisting conditions, 17 million people who gained insurance through Medicaid expansion, 12 million seniors who pay less for prescription drugs, and over 2 million adult children who will no longer be able to stay on their parent's health insurance.

I am particularly worried about the 2.5 million Marylanders with a preexisting condition, 320,000 of whom are children. Before the ACA, insurers denied health coverage to Americans with preexisting health conditions.

The most common preexisting conditions are pregnancy, cancer, diabetes, high blood pressure, behavioral health disorders, high cholesterol, asthma, and heart conditions. Patients with preexisting conditions must know their health insurance coverage is there for them when they are healthy, but particularly when they become sick. The ACA took the important step to ensure this, by protecting all patients against arbitrary, sudden loss of insurance. This security would, of course, be eliminated if the ACA is overturned.

In addition to these important consumer protections, the Affordable Care Act increased access to care for millions of people who previously were uninsured or underinsured. Through Medicaid expansion, 13 million low-income Americans now have dependable, comprehensive healthcare, including 300,000 Marylanders. We must protect the Medicaid expansion population and other uninsured or underinsured populations from the Trump administration's efforts to eliminate their access to affordable care.

The numerous reckless attempts by the Trump administration to sabotage the ACA disregard how much good healthcare reform has done for all Americans. Before we passed the Affordable Care Act, too many people fell through the cracks with inadequate insurance coverage, annual and lifetime coverage caps, or limits to preventive health services. Too many declared bankruptcy because of high healthcare costs or skipped prescribed care or medications because of the costs.

The ACA ensured that many of those people now have access to higher-quality coverage. Core elements of the law require companies to cover adults and children with preexisting conditions, prevent insurance companies from setting annual and lifetime limits, and

allow young adults can stay on a parent's health plan until the age of 26.

If the Affordable Care Act is struck down, insurers could bring back annual and lifetime limits on coverage, adults covered by Medicaid expansion would lose vital health services, young people would be kicked off their parent's insurance, and issuers could sell skimpy plans that don't cover essential health benefits like prescription drugs, emergency room visits, mental health and substance use, and maternity care.

The unprecedented actions by the Trump administration to not defend the ACA jeopardizes the healthcare of all Americans. I believe that accessible, affordable healthcare is a human right. Securing this right has always been a challenge. Democrats will continue to fight for consumer protections and increased access to care that have been guaranteed through the Affordable Care Act. As President Trump refuses to defend the Affordable Care Act, he risks the health and well-being of millions of Americans.

Ms. KLOBUCHAR. Mr. President, today I wish to again express my support for the Affordable Care Act, ACA.

We must continue fighting to protect the safeguards that were put in place by the ACA, which prohibits abusive practices that previously kept healthcare out of reach for millions of Americans, like denying coverage to people with preexisting conditions. About half of all Americans have preexisting conditions and could be forced to pay significantly higher premiums or lose access to coverage altogether if the ACA is overturned. At least 21 million people could lose their health insurance if the ACA is struck down. In my State, Minnesotans would see a loss of \$364 million in premium tax credits, and roughly 272,000 people would lose their coverage.

Earlier this year, I came to the Senate floor to read 100 letters from people in my State and across the country who explained what the ACA has meant to them. These stories are just a small window into the positive impact of the ACA and how so many people would suffer if its protections were eliminated.

Instead of striking down this landmark legislation, we should build on its strengths, defend the critical consumer protections that it provides for so many, and make it stronger. We cannot go back to a time when people who are sick can be denied health insurance coverage. This is not the time to look back and try to tear things down; we should look ahead and work to strengthen our healthcare system moving forward. It is for this reason that we must and will continue to fight against efforts to take away healthcare protections from millions of Americans.

TEXAS SENATE RESOLUTION NO. 816

Mr. CORNYN. Mr. President, today I ask unanimous consent that a resolution

passed by the senate of the State of Texas be printed into the CONGRESSIONAL RECORD. Senate Resolution No. 816 was adopted by the Texas Senate on May 24, 2019, by a vote of 31-0 and urges the U.S. Congress to consolidate disaster recovery housing funding for Hurricane Harvey.

There being no objection, the material was ordered to be printed in the RECORD, as follows:

SENATE RESOLUTION

Whereas, Hurricane Harvey struck the Texas coast on August 25, 2017, causing an estimated \$125 billion in damage; and

Whereas, The second most destructive storm in American history, the hurricane impacted approximately 30 percent of the population of Texas, destroying homes, damaging infrastructure, and displacing thousands of families along the coast; and

Whereas, The Federal Emergency Management Agency received nearly 800,000 applications from affected Texans for some form of assistance; as many as 83 percent of the people whose homes flooded did not have flood insurance, creating unprecedented demand for state and federal disaster recovery assistance; and

Whereas, The FEMA application process is so duplicative and confusing, and the United States Department of Housing and Urban Development regulations are so complex, that many survivors give up trying to navigate the system and, therefore, receive no assistance; and

Whereas, Consolidating funding for recovery housing programs into a single Disaster Housing Response and Recovery Block Grant would increase efficiency, save taxpayer dollars, and speed the recovery process by combining FEMA's short-term programs and HUD's long-term programs; Now, therefore, be it

Resolved, That the Senate of the State of Texas, 86th Legislature, hereby respectfully urge the United States Congress to enact legislation to consolidate disaster recovery housing funding into a single Disaster Housing Response and Recovery Block Grant; and be it further

Resolved, That the secretary of the senate forward official copies of this resolution to the president of the United States, to the president of the Senate and the speaker of the House of Representatives of the United States Congress, and to all the members of the Texas delegation to Congress with the request that this resolution be entered in the Congressional Record as a memorial to the Congress of the United States of America.

I hereby certify that the above Resolution was adopted by the Senate on May 24, 2019, by the following vote: Yeas 31, Nays 0.

DAN PATRICK,

President of the Senate.

PATSY SPAW,

Secretary of the Senate.

[State Seal Affixed]

CENTENNIAL OF THE AMERICAN LEGION

Mr. BLUMENTHAL. Mr. President, today I wish to recognize the American Legion as it celebrates 100 years of dedication to serving and advocating for veterans on a local and national level.

Chartered and incorporated by Congress in 1919, the American Legion has grown to support veterans nationwide. The American Legion Department of Connecticut was established in the

same year and is home to some of the first posts in the country.

Over the past century, the American Legion has established itself as our Nation's largest veterans service organizations. As a nonpartisan and not-for-profit organization, the Legion uniquely offers a multitude of local programs devoted to our servicemembers and their communities. Through youth mentorship and athletics, reintegration assistance for wounded veterans, and many other critical activities, the Legion plays an important role in their communities throughout the United States.

With around 150 posts across Connecticut, the organization helps bring together and shape the lives of many veterans, their families, and their neighborhoods. The Department of Connecticut follows the four pillars of the American Legion: supporting Americanism, national security, advocating for veterans' affairs and healthcare, and preparing children throughout our state for future success.

In particular, they generously help children of all ages in Connecticut explore their potential with activities such as State Police Youth Week, an oratorical contest focused on deepening high school students' understanding of the U.S. Constitution, American Legion Baseball, and summer government education programs.

As a member who has regularly attended events for the Legion, including several of their youth programs, annual conventions, Veterans Day events, and mid-winter conferences, I can proudly attest firsthand to the impressive work they accomplish on behalf of Connecticut veterans and their families. As the American Legion and its Department of Connecticut recognize and celebrate their rich and productive 100-year history, the dedicated staff and volunteers continue to look toward the future and expand the positive impact of their outreach and programs.

Committed to serving veterans and their communities throughout our State, the American Legion Department of Connecticut provides essential advocacy and services that help to better lives and create new opportunities. I applaud the accomplishments of the American Legion's devoted officers and volunteers, and I hope my colleagues will join me in congratulating the American Legion and the American Legion Department of Connecticut on a century of excellence.

CHRONIC DISEASE DAY

Mr. CRAMER. Mr. President, today I wish to recognize July 10 as Chronic Disease Day and to call attention to the unique healthcare needs of patients from this diverse community. This date is significant due to the fact that it represents the 7 out of 10 Americans who will succumb to some form of chronic illness. Governors and State legislatures across the country will be

working with local chronic disease patient advocates on July 10 to highlight contemporary challenges and opportunities, and I encourage my colleagues to join in this effort.

Chronic illness includes cancers, cardiovascular disease, and many other conditions, some very rare. Some chronic illnesses can be preventable, and Chronic Disease Day is an opportunity to feature healthy lifestyles, the importance of regular health screenings, and proper self-care. In this regard, awareness and education can go a long way towards improving patient outcomes, preventing the progression of disease, and lowering healthcare costs.

Many chronic illnesses are unavoidable though and have genetic components or are simply idiopathic with an unknown origin. These include rare and life-threatening conditions that require near constant access to life-sustaining care or therapies. These patients occasionally rely on voluntary charitable assistance programs to maintain this access when they have no other options.

July 10 is a time to promote the importance of preventing chronic disease while reflecting on opportunities to better serve individuals and families facing serious chronic illness. I call on my colleagues to please join me in recognizing Chronic Disease Day.

ADDITIONAL STATEMENTS

RECOGNIZING THE OUTDOOR INDUSTRY ASSOCIATION

• Mr. BENNET. Mr. President, I wish to recognize the 30th anniversary of the Outdoor Industry Association, OIA. Based in Boulder, CO, OIA is the leading trade organization of the outdoor recreation gear and apparel industry.

Founded by a group of 14 brands and specialty retailers, OIA has grown to include 1,300 companies that are the backbone of an \$887 billion outdoor recreation economy supporting 7.6 million jobs across the United States. For the past three decades, OIA has represented American businesses and individuals whose vocations and avocations are connected to this Nation's best idea: our public lands and waters. OIA is motivated by a shared commitment to protecting, maintaining, and expanding outdoor recreation infrastructure and ensuring every person in the United States has equitable access to nature.

From its earliest days, OIA has partnered with conservation organizations to advocate for our public land and water. OIA helped to permanently reauthorize the Land and Water Conservation Fund, and they continue to press for full funding. They have also supported wildfire funding legislation, rails-to-trails, and similar transportation infrastructure programs and continue to work toward responsible climate and energy policy. The organi-

zation also produces outdoor recreation economy report that highlights the influence of the outdoor recreation sector on the national economy, including statistics on consumer spending, tax revenue, and job creation. This report is an incredible resource for lawmakers, land managers, and local planners. As a result, over the past half decade and following Colorado's leadership, States have created State offices of outdoor recreation to ensure that government leaders and business leaders are working together to grow their recreation economies.

I am honored to continue to work with OIA to protect our public land and water. Earlier this year, OIA announced their support for the Colorado Outdoor Recreation and Economy Act, S. 241/H.R. 823, our bill to protect 400,000 acres of public land in Colorado while safeguarding existing outdoor recreation opportunities. OIA stated that they are "one hundred percent in support of the Colorado Outdoor Recreation and Economy Act because it would protect nearly half a million acres of public lands across Colorado and support the state's \$28 billion outdoor recreation economy while honoring its history in protecting Camp Hale, the origin of the 10th mountain division during WWII." I appreciate OIA's support for conserving public land in Colorado.

OIA members exemplify the collaborative and altruistic stewardship at the heart of the outdoor recreation industry. For that, I congratulate OIA on this 30-year anniversary and thank them for their contributions to our American outdoor heritage.●

TRIBUTE TO ROBERT WILLIAMS

• Mr. ISAKSON. Mr. President, today, I am honored to recognize in the RECORD Mr. Robert M. Williams, Jr., who recently retired after almost half a century as editor and publisher of the *Blackshear Times* in Blackshear, GA.

While he may be a small-town newspaperman, Robert Williams is known throughout south Georgia and across much of our State because of his work ethic, his devotion to the printed word, and his dedication to the newspaper business and what it means to a community. For more than 48 years, Robert has worked to be accurate, fair, and to provide his readers with the news that affects them and the community they all cherish. He has personally written more than 2,000 columns during his career.

It is worth mentioning that the newspaper's motto, printed at the top of the front page of the printed publication and online, is one Robert has also claimed as his own: "Liked by Many, Cussed by Some, Read by Them All." With the weekly newspaper also turning 150 years this year under Robert's leadership, both have long been widely read.

At Just 20 years old, Robert began his career at the *Blackshear Times*

after coming down to the community from the University of Georgia in Athens, GA. He was brought in by two legendary Georgians themselves, Roy Chalker, Sr., and Wilkes Williams of Waynesboro, to turn their investment around. Turn it around he did, settling well into the community at the same time. A short 5 years later, Robert purchased the *Blackshear Times*. Under Robert's leadership during the last 48 years, the newspaper has won hundreds of awards in a variety of categories.

Robert and his wife Cheryl have both loyally and successfully served not only this publication, but the newspaper industry as a whole. The *Blackshear Times* is one of five newspapers that Robert and Cheryl have owned as part of their SouthFire Newspapers organization, which also includes the *Alma Times*, the *Charlton County Herald*, the *Telfair Enterprise*, and the *Monroe County Reporter* in Georgia. Robert and Cheryl have both served as president of the Georgia Press Association, our State's newspaper industry advocacy organization. Robert was also president of the 2,300-member National Newspaper Association in 2014, serving nationally as the voice of small-town newspapers.

Locally, Robert Williams served two terms on the *Blackshear City Council* and served as executive director of both the *Pierce County Industrial Development Authority* and the *Pierce County Chamber of Commerce*. Robert is also a graduate of the *Leadership Georgia* program, an organization we both hold dear and that has guided our service to the State. Robert has found countless ways to give back. Whether it was as a member of the *Georgia Agriculture Exposition Authority* that governs the *Georgia National Fairgrounds* in Perry or the local college foundation board, Robert and Cheryl have made an impact well beyond *Blackshear* both professionally and personally.

Last week, Robert announced the sale of the *Blackshear Times*, bidding farewell after one of the longest editorial tenures in Georgia. With his final column as editor and publisher, Robert was incredibly gracious, thanking his colleagues, employees, mentors, and the fine bankers who gave him those first loans.

I speak for all Georgians when I say thank you to Robert and Cheryl for the difference you have made in our State. I count myself lucky to call you a friend, and Dianne and I wish you both the very best as you plan your future.●

REMEMBERING CHRIS CLINE

• Mr. MANCHIN. Mr. President, I can't express enough what Chris Cline meant to our home State of West Virginia. He represented the very best of the Mountain State, which is saying a lot. Born in McDowell County and raised a stone's throw from the train tracks in the coalfields of Beckley, Chris's family was wealthy beyond measure in the

only currency that truly matters: love, work ethic, and profound strength of character.

One of my favorite stories about Chris is, when he was a child, he filled bags with dirt for his father, Paul, to use for blasting holes at the mine. His father paid him a penny per bag. It was once the front porch caved in that his father realized he had been getting the dirt from beneath it. Chris said that was how he learned the importance of infrastructure.

He never lost touch with the days he would come home from a shift in the mines as a young man of only 15, his face caked in coal dust. In fact, he kept his first hard hat, battered from years of hard labor, in a place of honor at his home in Beckley. From this foundation, he built an opportunity empire. From the early days of Pioneer Fuel to when Chris founded Foresight Energy, much of the success he gained was returned to the men and women who keep the lights on. He treated his workforce as family, knowing very well what it was like to be in their shoes, and so he invested in the safest, most innovative, and efficient tools and methods.

His coal enterprises took him from Appalachia to Illinois to Canada. He offered cash incentives to his miners, installed advanced and safe mining equipment, and was ahead of his time in anticipating the market for coal. Chris believed it was not enough to be innovative, you need a little luck. At Foresight, his four mine complexes were the most productive underground operations in the Nation. He bought docks on the Mississippi River and built rail spurs to haul coal onto ships bound for India, Europe, and Asia.

Chris understood opponents of burning coal while defending coal and his role in supplying the world with it. He believed that people deserved the cheapest energy they could get. He had a curious mind, was eager to learn about everything, and never stopped learning. As committed as he was to coal energy, for his Big Grand Cay property, he installed solar panels and batteries. Where renewable energy sources made sense, he was eager to embrace them.

There is no greater accomplishment in the world than to be in a position to give back to the community you love, that made you who you are. That is what made Chris the wonderful, inspiring, and generous person he was. Through the Cline Family Foundation, founded in 2009, Chris made a profound impact on Marshal University and West Virginia University. His legacy will remain forever in the hearts of all who had the privilege of knowing him, and he will be remembered through the countless lives he benefited with his generosity to our academic institutions. Chris believed with all his heart that West Virginians are the most hard-working, ethical people in our Nation, and he wanted to ensure they had every opportunity to utilize their skills

with the best possible resources to build their lives from the ground up, just as he did. His mission was for each of his accomplishments to pave the way for others to go even further than he did.

Chris was generous with his philanthropy publicly through the Cline Family Foundation, but most importantly, he was generous and compassionate privately, almost daily. The foundation focuses on donations throughout West Virginia in recognition of the community's contribution to his success. It offers scholarships and grants, endows universities, and financially supports charitable organizations that make life better for children and older youth. Chris once said that everyone in West Virginia contributed to his success, and he was determined to repay the favor. He certainly did, and our statewide community is better for it.

Among other donations, the Cline Family Foundation supported Place of Hope, a foster care and adoption organization; Peacehaven Community Farm, a home for disabled adults; orphanages in West Virginia and Haiti; Save the Children; humanitarian aid organizations in Tanzania; churches; and the Raleigh County YMCA, among other organizations, and many needy individuals over the years. He also supported the Benjamin School from which his daughter Kameron graduated in 2015. Few people beyond the recipients know details of Mr. Cline's many and constant personal acts of private charity.

Sharing his adventures with his four children and his lifelong friends was his absolute favorite way to spend his time. He would take crowds of friends and family to the Super Bowl, the Big East Tournament, countless other sporting events, and on his frequent world travels. Chris was an adventure junkie, always looking forward to the next time he could drive a fast car or ride a four-wheeler through the West Virginia hills.

I can't speak enough to what a good-hearted, wonderful person he truly was. I always thought of him as a man for all seasons. No matter the circumstances, he kept a cool head and a warm demeanor, always able to discern the most honorable path forward. It was an honor to call him my friend, and I miss him dearly.

I join all West Virginians in extending my deepest condolences to his children, Candice and her husband James, Christopher, and Alex, for the loss of their loving father and their sister, Kameron. I also extend my condolences to Chris's brothers Greg and Kenneth. It is my hope the entire Cline family is able to find peace, strength, and support in one another.●

TRIBUTE TO MEREDITH BENSON

● Mr. THUNE. Mr. President, today I recognize Meredith Benson, an intern in my Washington, DC, office, for all of

the hard work she has done for me, my staff, and the State of South Dakota over the past several weeks.

Meredith is a graduate of Lincoln High School in Sioux Falls, SD. Currently, she is attending Creighton University in Omaha, NE, where she is double majoring in chemistry and Spanish. She is a hard worker who has been dedicated to getting the most out of her internship experience.

I extend my sincere thanks and appreciation to Meredith for all of the fine work she has done and wish her continued success in the years to come.●

TRIBUTE TO AUDREY COPE

● Mr. THUNE. Mr. President, today I recognize Audrey Cope, an intern in my Washington, DC, office, for all of the hard work she has done for me, my staff, and the State of South Dakota over the past several weeks.

Audrey is a graduate of St. Thomas More High School in Rapid City, SD. Currently, she is attending Augustana University in Sioux Falls, SD, where she is double majoring in government and international affairs and French and minoring in political philosophy. She is a hard worker who has been dedicated to getting the most out of her internship experience.

I extend my sincere thanks and appreciation to Audrey for all of the fine work she has done and wish her continued success in the years to come.●

TRIBUTE TO RYDER FUHRMAN

● Mr. THUNE. Mr. President, today I recognize Ryder Fuhrman, an intern in my Aberdeen, SD, office, for all of the hard work he has done for me, my staff, and the State of South Dakota over the past several weeks.

Ryder is a graduate of Warner High School in Warner, SD. Currently, he is attending Northern State University in Aberdeen, where he is majoring in political science and minoring in economics and legal studies. He is a hard worker who has been dedicated to getting the most out of his internship experience.

I extend my sincere thanks and appreciation to Ryder for all of the fine work he has done and wish him continued success in the years to come.●

TRIBUTE TO KIERA LEDDY

● Mr. THUNE. Mr. President, today I recognize Kiera Leddy, an intern in my Washington, DC, office, for all of the hard work she has done for me, my staff, and the State of South Dakota over the past several weeks.

Kiera is a recent graduate of Oklahoma State University in Stillwater, OK, having earned a degree in agricultural communications. This fall, Kiera plans to attend Drake University Law School in Des Moines, IA. She is a hard worker who has been dedicated to getting the most out of her internship experience.

I extend my sincere thanks and appreciation to Kiera for all of the fine work she has done and wish her continued success in the years to come.●

TRIBUTE TO GEORGE MICKELSON

● Mr. THUNE. Mr. President, today I recognize George Mickelson, an intern in my Washington, DC, office, for all of the hard work he has done for me, my staff, and the State of South Dakota over the past several weeks.

George is a graduate of Lincoln High School in Sioux Falls, SD. Currently, he is attending Creighton University in Omaha, NE, where he is majoring in finance and technology. He is a hard worker who has been dedicated to getting the most out of his internship experience.

I extend my sincere thanks and appreciation to George for all of the fine work he has done and wish him continued success in the years to come.●

TRIBUTE TO DANIEL MOE

● Mr. THUNE. Mr. President, today I recognize Daniel Moe, an intern in my Washington, DC, office, for all of the hard work he has done for me, my staff, and the State of South Dakota over the past several weeks.

Daniel is a graduate of Sioux Falls Christian High School in Sioux Falls, SD. Currently, he is attending Dordt University in Sioux Center, IA, where he is majoring in biology and minoring in political science and chemistry. He is a hard worker who has been dedicated to getting the most out of his internship experience.

I extend my sincere thanks and appreciation to Daniel for all of the fine work he has done and wish him continued success in the years to come.●

MESSAGE FROM THE HOUSE

At 10:30 a.m., a message from the House of Representatives, delivered by Mrs. Cole, one of its reading clerks, announced that the House has passed the following bill, without amendment:

S. 1749. An act to clarify seasoning requirements for certain refinanced mortgage loans, and for other purposes.

The message also announced that the House has passed the following bills, in which it requests the concurrence of the Senate:

H.R. 1988. An act to clarify seasoning requirements for certain refinanced mortgage loans, and for other purposes.

H.R. 2162. An act to require the Secretary of Housing and Urban Development to discount FHA single-family mortgage insurance premium payments for first-time homebuyers who complete a financial literacy housing counseling program.

H.R. 2409. An act to amend the Securities Exchange Act of 1934 to expand access to capital for rural-area small businesses, and for other purposes.

H.R. 2515. An act to amend the Securities and Exchange Act of 1934 to amend the definition of whistleblower, to extend the anti-retaliation protections provided to whistleblowers, and for other purposes.

H.R. 2919. An act to require the Securities and Exchange Commission to carry out a study to evaluate the issues affecting the provision of and reliance upon investment research into small issuers.

H.R. 3050. An act to require the Securities and Exchange Commission to carry out a study of the 10 per centum threshold limitation applicable to the definition of a diversified company under the Investment Company Act of 1940, and for other purposes.

MEASURES REFERRED

The following bills were read the first and the second times by unanimous consent, and referred as indicated:

H.R. 2162. An act to require the Secretary of Housing and Urban Development to discount FHA single-family mortgage insurance premium payments for first-time homebuyers who complete a financial literacy housing counseling program; to the Committee on Banking, Housing, and Urban Affairs.

H.R. 2409. An act to amend the Securities Exchange Act of 1934 to expand access to capital for rural-area small businesses, and for other purposes; to the Committee on Banking, Housing, and Urban Affairs.

H.R. 2515. An act to amend the Securities and Exchange Act of 1934 to amend the definition of whistleblower, to extend the anti-retaliation protections provided to whistleblowers, and for other purposes; to the Committee on Banking, Housing, and Urban Affairs.

H.R. 2919. An act to require the Securities and Exchange Commission to carry out a study to evaluate the issues affecting the provision of and reliance upon investment research into small issuers; to the Committee on Banking, Housing, and Urban Affairs.

H.R. 3050. An act to require the Securities and Exchange Commission to carry out a study of the 10 per centum threshold limitation applicable to the definition of a diversified company under the Investment Company Act of 1940, and for other purposes; to the Committee on Banking, Housing, and Urban Affairs.

MEASURES PLACED ON THE CALENDAR

The following bills were read the second time, and placed on the calendar:

H.R. 2740. An act making appropriations for the Departments of Labor, Health and Human Services, and Education, and related agencies for the fiscal year ending September 30, 2020, and for other purposes.

H.R. 3055. An act making appropriations for the Departments of Commerce and Justice, Science, and Related Agencies for the fiscal year ending September 30, 2020, and for other purposes.

The following bill was read the first and second times by unanimous consent, and placed on the calendar:

H.R. 1988. An act to clarify seasoning requirements for certain refinanced mortgage loans, and for other purposes.

EXECUTIVE AND OTHER COMMUNICATIONS

The following communications were laid before the Senate, together with accompanying papers, reports, and documents, and were referred as indicated:

EC-1862. A communication from the Director of the Regulatory Management Division,

Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Acetic Acid Ethenyl Ester, Polymer with Ethene and Ethenol; Tolerance Exemption" (FRL No. 9995-17-OCSP) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Agriculture, Nutrition, and Forestry.

EC-1863. A communication from the Director of the Regulatory Management Division, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Acrylamide-Sodium Acrylamidomethylpropanesulfonate Copolymer; Tolerance Exemption" (FRL No. 9994-53-OCSP) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Agriculture, Nutrition, and Forestry.

EC-1864. A communication from the Director of the Regulatory Management Division, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "2-Propenoic acid, methyl ester, polymer with ethene and 2,5-furandione; Tolerance Exemption" (FRL No. 9995-51-OCSP) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Agriculture, Nutrition, and Forestry.

EC-1865. A communication from the Assistant Secretary of Defense (Acquisition), transmitting, pursuant to law, a notice of additional time required to complete an independent analysis of the feasibility of developing a budget request for the full Future Years Defense Program; to the Committee on Armed Services.

EC-1866. A communication from the Acting Principal Deputy Director, Defense Pricing and Contracting, Department of Defense, transmitting, pursuant to law, the report relative to the requirement to authorize subcontract placement for F-35 Lightning II European and Pacific regional warehousing to OneLogistics and BAE Systems Australia, respectively; to the Committee on Armed Services.

EC-1867. A communication from the Under Secretary of Defense (Acquisition and Sustainment), transmitting, pursuant to law, a report entitled "Report to Congress on Distribution of Department of Defense Depot Maintenance Workloads for Fiscal Years 2018 through 2020"; to the Committee on Armed Services.

EC-1868. A communication from the Acting Principal Deputy Director, Defense Pricing and Contracting, Department of Defense, transmitting, pursuant to law, the report of a rule entitled "Defense Federal Acquisition Regulation Supplement: Repeal of DFARS Clause 'Price Adjustment'" ((RIN0750-AK08) (DFARS Case 2019-D048)) received during adjournment of the Senate in the Office of the President of the Senate on July 2, 2019; to the Committee on Armed Services.

EC-1869. A communication from the Acting Principal Deputy Director, Defense Pricing and Contracting, Department of Defense, transmitting, pursuant to law, the report of a rule entitled "Defense Federal Acquisition Regulation Supplement: Annual Representations and Certifications-Alternate A" ((RIN0750-AK69) (DFARS Case 2019-D030)) received during adjournment of the Senate in the Office of the President of the Senate on July 2, 2019; to the Committee on Armed Services.

EC-1870. A communication from the Secretary of the Treasury, transmitting, pursuant to law, a six-month periodic report on the national emergency with respect to transnational criminal organizations that was declared in Executive Order 13581 of July 24, 2011; to the Committee on Banking, Housing, and Urban Affairs.

EC-1871. A communication from the Secretary, Department of the Treasury, transmitting, pursuant to law, the six-month periodic report on the national emergency with respect to serious human rights abuse and corruption that was declared in Executive Order 13818 of December 20, 2017; to the Committee on Banking, Housing, and Urban Affairs.

EC-1872. A communication from the Chairman of the Board of Governors, Federal Reserve System, transmitting, pursuant to law, the Board's semiannual Monetary Policy Report to Congress; to the Committee on Banking, Housing, and Urban Affairs.

EC-1873. A communication from the Assistant Director for Regulatory Affairs, Office of Foreign Assets Control, Department of the Treasury, transmitting, pursuant to law, the report of a rule entitled "Reporting, Procedures and Penalties Regulations" (31 CFR Part 501) received during adjournment of the Senate in the Office of the President of the Senate on July 1, 2019; to the Committee on Banking, Housing, and Urban Affairs.

EC-1874. A communication from the Assistant Secretary for Export Administration, Bureau of Industry and Security, Department of Commerce, transmitting, pursuant to law, the report of a rule entitled "Revisions to the Unverified List (UVL)" (RIN0694-AH79) received during adjournment of the Senate in the Office of the President of the Senate on July 1, 2019; to the Committee on Banking, Housing, and Urban Affairs.

EC-1875. A communication from the President of the United States, transmitting, pursuant to law, a report relative to the designation as an emergency requirements all funding so designated by the Congress in the Emergency Supplemental Appropriations for Humanitarian Assistance and Security at the Southern Border Act, 2019, pursuant to section 251(b)(2)(A)(i) of the Balanced Budget and Emergency Deficit Control Act of 1985, for the enclosed list of accounts; to the Committee on the Budget.

EC-1876. A communication from the Chairman of the Federal Energy Regulatory Commission, transmitting, pursuant to law, a report relative to the status of all extensions granted by Congress regarding the deadlines for the commencement of construction of Commission-licensed hydropower projects, including information about any delays by the Commission with respect to extensions and the reasons for such delays; to the Committee on Energy and Natural Resources.

EC-1877. A communication from a Senior Official performing the duties of the Assistant Secretary for Fish and Wildlife and Parks, National Park Service, Department of the Interior, transmitting, pursuant to law, the report of a rule entitled "National Capital Region; Event at the Washington Monument" (RIN1024-AE59) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Energy and Natural Resources.

EC-1878. A communication from the Director of the Regulatory Management Division, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Air Plan Approval; Kentucky; Jefferson County Existing and New VOC Water Separators Rule Revisions" (FRL No. 9996-24-Region 4) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Environment and Public Works.

EC-1879. A communication from the Director of the Regulatory Management Division, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Air Plan Approval; Missouri; Measurement of Emissions of Air Contaminants"

(FRL No. 9995-61-Region 7) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Environment and Public Works.

EC-1880. A communication from the Director of the Regulatory Management Division, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Approval and Promulgation of Air Quality Implementation Plans; Delaware; Emissions Statements Rule Certification for the 2008 Ozone National Ambient Air Quality Standard" (FRL No. 9996-07-Region 3) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Environment and Public Works.

EC-1881. A communication from the Director of the Regulatory Management Division, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Approval and Promulgation of Air Quality Implementation Plans; Delaware; Negative Declaration for the Oil and Natural Gas Industry Control Techniques Guidelines" (FRL No. 9996-26-Region 3) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Environment and Public Works.

EC-1882. A communication from the Director of the Regulatory Management Division, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Designation of Areas for Air Quality Planning Purposes; California; Coachella Valley 8-Hour Ozone Nonattainment Area; Reclassification to Extreme" (FRL No. 9996-12-Region 9) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Environment and Public Works.

EC-1883. A communication from the Director of the Regulatory Management Division, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Standards of Performance for Stationary Compression Ignition Internal Combustion Engines Amendments" (FRL No. 9996-21-OAR) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Environment and Public Works.

EC-1884. A communication from the Director of the Regulatory Management Division, Environmental Protection Agency, transmitting, pursuant to law, the report of a rule entitled "Terre Haute, Indiana, Partial Vigo County 2010 SO2 Redesignation and Maintenance Plan (Fayette and Harrison Townships)" (FRL No. 9996-11-Region 5) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Environment and Public Works.

EC-1885. A communication from the Assistant Secretary, Legislative Affairs, Department of State, transmitting, pursuant to law, a report relative to measures taken and results achieved to promote the rule of law in Russia and to support U.S. trade and investment by strengthening investor protections in Russia, received in the office of the President pro tempore of the Senate; to the Committee on Finance.

EC-1886. A communication from the Chief of the Publications and Regulations Branch, Internal Revenue Service, Department of the Treasury, transmitting, pursuant to law, the report of a rule entitled "Self-Employment Tax Treatment of Partners in a Partnership that Owns a Disregarded Entity; Final Regulations" (RIN1545-BM77) received in the Office of the President of the Senate on July 8, 2019; to the Committee on Finance.

EC-1887. A communication from the Assistant Secretary, Legislative Affairs, Depart-

ment of State, transmitting, pursuant to law, a report consistent with the Authorization for Use of Military Force Against Iraq Resolution of 2002 (P.L. 107-243) and the Authorization for the Use of Military Force Against Iraq Resolution of 1991 (P.L. 102-1) for the September 10, 2018 to November 9, 2018 reporting period; to the Committee on Foreign Relations.

EC-1888. A communication from the Assistant Secretary, Legislative Affairs, Department of State, transmitting, pursuant to law, a report consistent with the Authorization for Use of Military Force Against Iraq Resolution of 2002 (P.L. 107-243) and the Authorization for the Use of Military Force Against Iraq Resolution of 1991 (P.L. 102-1) for the November 10, 2018 to January 9, 2019 reporting period; to the Committee on Foreign Relations.

EC-1889. A communication from the Secretary of Education, transmitting, pursuant to law, the report of a rule entitled "Title I—Improving the Academic Achievement of the Disadvantaged and General Provisions; Technical Amendments" (RIN1810-AB47 and RIN1810-AB55) received in the Office of the President pro tempore of the Senate; to the Committee on Health, Education, Labor, and Pensions.

EC-1890. A communication from the Secretary of Health and Human Services, transmitting, pursuant to law, the report of a petition to add workers at the Idaho National Laboratory in Scoville, Idaho, to the Special Exposure Cohort; to the Committee on Health, Education, Labor, and Pensions.

EC-1891. A communication from the Acting Assistant Secretary for Legislation, Department of Health and Human Services, transmitting, pursuant to law, a report entitled "Report to Congress on Nurse Education, Practice, Quality and Retention Programs; Fiscal Year 2018"; to the Committee on Health, Education, Labor, and Pensions.

EC-1892. A communication from the Acting Assistant Secretary for Legislation, Department of Health and Human Services, transmitting, pursuant to law, a report entitled "Fiscal Year 2017 Performance Report to Congress for the Office of Combination Products"; to the Committee on Health, Education, Labor, and Pensions.

EC-1893. A communication from the White House Liaison, Department of Education, transmitting, pursuant to law, the report of a vacancy in the position of Assistant Secretary, Department of Education, received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Health, Education, Labor, and Pensions.

EC-1894. A communication from the Deputy General Counsel, Office of General Counsel, Department of Education, transmitting, pursuant to law, the report of a rule entitled "Outdated Regulations—Expanding Opportunity Through Quality Charter Schools Program (CSP)—Grants for Credit Enhancement for Charter School Facilities" received in the Office of the President pro tempore; to the Committee on Health, Education, Labor, and Pensions.

EC-1895. A communication from the Director of Regulations and Policy Management Staff, Food and Drug Administration, Department of Health and Human Services, transmitting, pursuant to law, the report of a rule entitled "Internal Agency Review of Decisions; Requests for Supervisory Review of Certain Decisions Made by the Center for Devices and Radiological Health" (RIN1910-AH37) (Docket No. FDA-2016-N-2378) received in the Office of the President of the Senate on July 8, 2019; to the Committee on Health, Education, Labor, and Pensions.

EC-1896. A communication from the Acting Assistant Secretary, Office of Finance and

Operations, Department of Education, transmitting, pursuant to law, the Department's fiscal year 2017 FAIR Act Commercial and Inherently Governmental Activities Inventory and the Uniform Resource Locator (URL) for the report; to the Committee on Homeland Security and Governmental Affairs.

EC-1897. A communication from the Acting Assistant Secretary for Legislation, Department of Health and Human Services, transmitting, pursuant to law, a report entitled "2018 Annual Report to Congress on the Native Hawaiian Revolving Loan Fund"; to the Committee on Indian Affairs.

EC-1898. A communication from the Assistant Attorney General, Office of Legislative Affairs, Department of Justice, transmitting, pursuant to law, a report on the activities of the Community Relations Service for fiscal year 2018; to the Committee on the Judiciary.

EC-1899. A communication from the Federal Liaison Officer, Patent and Trademark Office, Department of Commerce, transmitting, pursuant to law, the report of a rule entitled "Requirement of U.S. Licensed Attorney for Foreign Trademark Applicants and Registrants" (RIN0651-AD30) received during adjournment of the Senate in the Office of the President of the Senate on July 1, 2019; to the Committee on the Judiciary.

EC-1900. A communication from the Assistant Attorney General, Office of Legislative Affairs, Department of Justice, transmitting, pursuant to law, a report entitled "Uninformed Services Employment and Reemployment Rights Act of 1994 (USERRA) Quarterly Report to Congress; Second Quarter of Fiscal Year 2019"; to the Committee on Veterans' Affairs.

EC-1901. A communication from the Chairman of the National Transportation Safety Board, transmitting, pursuant to law, the Board's 2018 Annual Report to Congress; to the Committee on Commerce, Science, and Transportation.

EC-1902. A communication from the Acting Director of the Office of Sustainable Fisheries, National Marine Fisheries Service, Department of Commerce, transmitting, pursuant to law, the report of a rule entitled "Authorization of Revised Reporting Requirements Due to Catastrophic Conditions for Federal Seafood Dealers and Individual Fishing Quota Dealers in Portions of Florida" (RIN0648-XG550) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Commerce, Science, and Transportation.

EC-1903. A communication from the Director of the Office of Sustainable Fisheries, National Marine Fisheries Service, Department of Commerce, transmitting, pursuant to law, the report of a rule entitled "Authorization of Revised Reporting Requirements Due to Catastrophic Conditions for Federal Seafood Dealers in Texas and Portions of Louisiana" (RIN0648-XF673) received in the Office of the President of the Senate on July 8, 2019; to the Committee on Commerce, Science, and Transportation.

EC-1904. A communication from the Acting Deputy Assistant Administrator for Regulatory Programs, National Marine Fisheries Service, Department of Commerce, transmitting, pursuant to law, the report of a rule entitled "Pacific Island Fisheries; 5-Year Extension of Moratorium on Harvest of Gold Corals" (RIN0648-BH60) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Commerce, Science, and Transportation.

EC-1905. A communication from the Acting Deputy Assistant Administrator for Regulatory Programs, National Marine Fisheries

Service, Department of Commerce, transmitting, pursuant to law, the report of a rule entitled "Magnuson-Stevens Act Provisions; Fisheries of the Northeastern United States; Northeast Multispecies Fishery; 2019 and 2020 Sector Operations Plans and 2019 Allocation of Northeast Multispecies Annual Catch Entitlements" (RIN0648-BI71) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Commerce, Science, and Transportation.

EC-1906. A communication from the Deputy Assistant Administrator for Regulatory Programs, National Marine Fisheries Service, Department of Commerce, transmitting, pursuant to law, the report of a rule entitled "Magnuson-Stevens Act Provisions; Fisheries of the Northeastern United States; Atlantic Herring Specifications and Sub-Annual Catch Limits for 2019" (RIN0648-XG608) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Commerce, Science, and Transportation.

EC-1907. A communication from the Acting Deputy Assistant Administrator for Regulatory Programs, National Marine Fisheries Service, Department of Commerce, transmitting, pursuant to law, the report of a rule entitled "Fisheries of the Northeastern United States; 2018-2020 Small-Mesh Multispecies Specifications" (RIN0648-BH76) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Commerce, Science, and Transportation.

EC-1908. A communication from the Deputy Assistant Administrator for Regulatory Programs, National Marine Fisheries Service, Department of Commerce, transmitting, pursuant to law, the report of a rule entitled "Fisheries of the Northeastern United States; Framework Adjustment 30 to the Atlantic Sea Scallop Fishery Management Plan" (RIN0648-BI66) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Commerce, Science, and Transportation.

EC-1909. A communication from the Acting Deputy Director, National Marine Fisheries Service, Department of Commerce, transmitting, pursuant to law, the report of a rule entitled "Fisheries of the Northeastern United States; Northeast Skate Complex; Adjustment to the Skate Wing and Skate Bait Inseason Possession Limits" (RIN0648-XF260) received in the Office of the President of the Senate on July 8, 2019; to the Committee on Commerce, Science, and Transportation.

EC-1910. A communication from the Acting Deputy Assistant Administrator for Regulatory Programs, National Marine Fisheries Service, Department of Commerce, transmitting, pursuant to law, the report of a rule entitled "Magnuson-Stevens Act Provisions; Fisheries Off West Coast States; Pacific Coast Groundfish Fishery; Annual Specifications and Management Measures for the 2018 Tribal and Non-Tribal Fisheries for Pacific Whiting" (RIN0648-BH31) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Commerce, Science, and Transportation.

EC-1911. A communication from the Acting Director, National Marine Fisheries Service, Department of Commerce, transmitting, pursuant to law, the report of a rule entitled "Magnuson-Stevens Act Provisions; Fisheries Off West Coast States; Pacific Coast Groundfish Fishery; 2017-2018 Biennial Specification and Management Measures; Inseason Adjustments" (RIN0648-BI47) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Commerce, Science, and Transportation.

EC-1912. A communication from the Deputy Assistant Administrator for Regulatory Programs, National Marine Fisheries Service, Department of Commerce, transmitting, pursuant to law, the report of a rule entitled "Fisheries Off West Coast States; West Coast Salmon Fisheries; 2018 Management Measures and a Temporary Rule" (RIN0648-BH22) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Commerce, Science, and Transportation.

EC-1913. A communication from the Acting Director, National Marine Fisheries Service, Department of Commerce, transmitting, pursuant to law, the report of a rule entitled "Fisheries Off West Coast States; Modifications of West Coast Commercial and Recreational Salmon Fisheries; Inseason Actions No. 5 through No. 11" (RIN0648-XF610) received in the Office of the President of the Senate on July 8, 2019; to the Committee on Commerce, Science, and Transportation.

EC-1914. A communication from the Acting Director, National Marine Fisheries Service, Department of Commerce, transmitting, pursuant to law, the report of a rule entitled "Western and Central Pacific Fisheries for Highly Migratory Species; 2017 Bigeye Tuna Longline Fishery Closure" (RIN0648-XF578) received in the Office of the President of the Senate on July 8, 2019; to the Committee on Commerce, Science, and Transportation.

EC-1915. A communication from the Deputy Assistant Administrator for Regulatory Programs, National Marine Fisheries Service, Department of Commerce, transmitting, pursuant to law, the report of a rule entitled "Atlantic Migratory Species; Shortfin Mako Shark Management Measures; Final Amendment 11" (RIN0648-BH75) received during adjournment of the Senate in the Office of the President of the Senate on July 3, 2019; to the Committee on Commerce, Science, and Transportation.

REPORTS OF COMMITTEES

The following reports of committees were submitted:

By Mr. RISCH, from the Committee on Foreign Relations, with an amendment in the nature of a substitute:

S. 1102. A bill to promote security and energy partnerships in the Eastern Mediterranean, and for other purposes.

EXECUTIVE REPORTS OF COMMITTEE

The following executive reports of nominations were submitted:

By Mr. WICKER for the Committee on Commerce, Science, and Transportation.

*Michelle A. Schultz, of Pennsylvania, to be a Member of the Surface Transportation Board for the term of five years.

*Coast Guard nominations beginning with Rear Adm. (lh) Melvin W. Bouboulis and ending with Rear Adm. (lh) Michael P. Ryan, which nominations were received by the Senate and appeared in the Congressional Record on January 30, 2019.

*Stephen M. Dickson, of Georgia, to be Administrator of the Federal Aviation Administration for the term of five years.

*Nomination was reported with recommendation that it be confirmed subject to the nominee's commitment to respond to requests to appear and testify before any duly constituted committee of the Senate.

EXECUTIVE REPORTS OF
COMMITTEE—TREATIES

The following executive reports of committee were submitted:

By Mr. RISCH, from the Committee on Foreign Relations:

Treaty Doc. 113-4: The Protocol Amending the Tax Convention with Spain (Ex. Rept. 116-1);

Treaty Doc. 112-1: Protocol Amending Tax Convention with Swiss Confederation (Ex. Rept. 116-2);

Treaty Doc. 114-1: Protocol Amending the Tax Convention with Japan (Ex. Rept. 116-3); and

Treaty Doc. 111-8: Protocol Amending Tax Convention with Luxembourg (Ex. Rept. 116-4)

The text of the committee-recommended resolutions of advice and consent to ratification are as follows:

[Treaty Doc. 113-4 The Protocol Amending the Tax Convention with Spain]

As reported by the Committee on Foreign Relations:

Resolved (two-thirds of the Senators present concurring therein),

Section 1. Senate Advice and Consent Subject to a Declaration and Conditions.

The Senate advises and consents to the ratification of the Protocol Amending the Convention between the United States of America and the Kingdom of Spain for the Avoidance of Double Taxation and the Prevention of Fiscal Evasion with respect to Taxes on Income and its Protocol, signed at Madrid on February 22, 1990, and a related Memorandum of Understanding, signed on January 14, 2013, at Madrid, together with correcting notes dated July 23, 2013, and January 31, 2014 (the "Protocol") (Treaty Doc. 113-4), subject to the declaration of section 2 and the conditions in section 3.

Sec. 2. Declaration.

The advice and consent of the Senate under section 1 is subject to the following declaration: The Protocol is self-executing.

Sec. 3. Conditions.

The advice and consent of the Senate under section 1 is subject to the following conditions:

(I) Not later than 2 years after the Protocol enters into force and prior to the first arbitration conducted pursuant to the binding arbitration mechanism provided for in the Protocol, the Secretary of the Treasury shall transmit to the Committee on Finance and the Committee on Foreign Relations of the Senate and the Joint Committee on Taxation the text of the rules of procedure applicable to arbitration panels, including conflict of interest rules to be applied to members of the arbitration panel.

(2)(A) Not later than 60 days after a determination has been reached by an arbitration panel in the tenth arbitration proceeding conducted pursuant to the Protocol or any of the treaties described in subparagraph (B), the Secretary of the Treasury shall prepare and submit to the Joint Committee on Taxation and the Committee on Finance of the Senate, subject to laws relating to taxpayer confidentiality, a detailed report regarding the operation and application of the arbitration mechanism contained in the Protocol and such treaties. The report shall include the following information:

(i) For the Protocol and each such treaty, the aggregate number of cases pending on the respective dates of entry into force of the Protocol and each treaty, including the following information:

(I) The number of such cases by treaty article or articles at issue.

(II) The number of such cases that have been resolved by the competent authorities

through a mutual agreement as of the date of the report.

(III) The number of such cases for which arbitration proceedings have commenced as of the date of the report.

(ii) A list of every case presented to the competent authorities after the entry into force of the Protocol and each such treaty, including the following information regarding each case:

(I) The commencement date of the case for purposes of determining when arbitration is available.

(II) Whether the adjustment triggering the case, if any, was made by the United States or the relevant treaty partner.

(III) Which treaty the case relates to.

(IV) The treaty article or articles at issue in the case.

(V) The date the case was resolved by the competent authorities through a mutual agreement, if so resolved.

(VI) The date on which an arbitration proceeding commenced, if an arbitration proceeding commenced.

(VII) The date on which a determination was reached by the arbitration panel, if a determination was reached, and an indication as to whether the panel found in favor of the United States or the relevant treaty partner.

(iii) With respect to each dispute submitted to arbitration and for which a determination was reached by the arbitration panel pursuant to the Protocol or any such treaty, the following information:

(I) In the case of a dispute submitted under the Protocol, an indication as to whether the presenter of the case to the competent authority of a Contracting State submitted a Position Paper for consideration by the arbitration panel.

(II) An indication as to whether the determination of the arbitration panel was accepted by each concerned person.

(III) The amount of income, expense, or taxation at issue in the case as determined by reference to the filings that were sufficient to set the commencement date of the case for purposes of determining when arbitration is available.

(IV) The proposed resolutions (income, expense, or taxation) submitted by each competent authority to the arbitration panel.

(B) The treaties referred to in subparagraph (A) are—

(i) the 2006 Protocol Amending the Convention between the United States of America and the Federal Republic of Germany for the Avoidance of Double Taxation and the Prevention of Fiscal Evasion with Respect to Taxes on Income and Capital and to Certain Other Taxes, done at Berlin June 1, 2006 (Treaty Doc. 109-20) (the "2006 German Protocol");

(ii) the Convention between the Government of the United States of America and the Government of the Kingdom of Belgium for the Avoidance of Double Taxation and the Prevention of Fiscal Evasion with Respect to Taxes on Income, and accompanying protocol, done at Brussels July 9, 1970 (the "Belgium Convention") (Treaty Doc. 110-3);

(iii) the Protocol Amending the Convention between the United States of Taxation and the Prevention of Fiscal Evasion with Respect to Taxes on Income and Capital and to Certain Other Taxes, done at Berlin June 1, 2006 (Treaty Doc. 109-20) (the "2006 German Protocol");

(ii) the Convention between the Government of the United States of America and the Government of the Kingdom of Belgium for the Avoidance of Double Taxation and the Prevention of Fiscal Evasion with Respect to Taxes on Income, and accompanying protocol, done at Brussels July 9, 1970 (the "Belgium Convention") (Treaty Doc. 110-3);

(iii) the Protocol Amending the Convention between the United States of America

and Canada with Respect to Taxes on Income and on Capital, signed at Washington September 26, 1980 (the "2007 Canada Protocol") (Treaty Doc. 110-15); and

(iv) the Protocol Amending the Convention between the Government of the United States of America and the Government of the French Republic for the Avoidance of Double Taxation and the Prevention of Fiscal Evasion with Respect to Taxes on Income and Capital, signed at Paris August 31, 1994 (the "2009 France Protocol") (Treaty Doc. 111-4).

(3) The Secretary of the Treasury shall prepare and submit the detailed report required under paragraph (2) on March 1 of the year following the year in which the first report is submitted to the Joint Committee on Taxation and the Committee on Finance of the Senate, and on an annual basis thereafter for a period of five years. In each such report, disputes that were resolved, either by a mutual agreement between the relevant competent authorities or by a determination of an arbitration panel, and noted as such in prior reports may be omitted.

(4) The reporting requirements referred to in paragraphs (2) and (3) supersede the reporting requirements contained in paragraphs (2) and (3) of section 3 of the resolution of advice and consent to ratification of the 2009 France Protocol, approved by the Senate on December 3, 2009.

[Treaty Doc. 114-1 Protocol Amending Tax Convention with Japan]

As reported by the Committee on Foreign Relations:

Resolved (two-thirds of the Senators present concurring therein),

Section 1. Senate Advice and Consent Subject to a Declaration and Conditions.

The Senate advises and consents to the ratification of the Protocol Amending the Convention between the Government of the United States of America and the Government of Japan for the Avoidance of Double Taxation and the Prevention of Fiscal Evasion with respect to Taxes on Income, and a related agreement entered into by an exchange of notes, both signed at Washington January 24, 2013, as corrected by exchange of notes on March 9 and 29, 2013 (the "Protocol") (Treaty Doc. 114-1), subject to the declaration of section 2 and the conditions in section 3.

Sec. 2. Declaration.

The advice and consent of the Senate under section 1 is subject to the following declaration: The Protocol is self-executing.

Sec. 3. Conditions.

The advice and consent of the Senate under section 1 is subject to the following conditions:

(I) Not later than 2 years after the Protocol enters into force and prior to the first arbitration conducted pursuant to the binding arbitration mechanism provided for in the Protocol, the Secretary of the Treasury shall transmit to the Committee on Finance and the Committee on Foreign Relations of the Senate and the Joint Committee on Taxation the text of the rules of procedure applicable to arbitration panels, including conflict of interest rules to be applied to members of the arbitration panel.

(2)(A) Not later than 60 days after a determination has been reached by an arbitration panel in the tenth arbitration proceeding conducted pursuant to the Protocol or any of the treaties described in subparagraph (B), the Secretary of the Treasury shall prepare and submit to the Joint Committee on Taxation and the Committee on Finance of the Senate, subject to laws relating to taxpayer confidentiality, a detailed report regarding the operation and application of the arbitration mechanism contained in the Protocol

and such treaties. The report shall include the following information:

(i) For the Protocol and each such treaty, the aggregate number of cases pending on the respective dates of entry into force of the Protocol and each treaty, including the following information:

(I) The number of such cases by treaty article or articles at issue.

(II) The number of such cases that have been resolved by the competent authorities through a mutual agreement as of the date of the report.

(III) The number of such cases for which arbitration proceedings have commenced as of the date of the report.

(ii) A list of every case presented to the competent authorities after the entry into force of the Protocol and each such treaty, including the following information regarding each case:

(I) The commencement date of the case for purposes of determining when arbitration is available.

(II) Whether the adjustment triggering the case, if any, was made by the United States or the relevant treaty partner.

(III) Which treaty the case relates to.

(IV) The treaty article or articles at issue in the case.

(V) The date the case was resolved by the competent authorities through a mutual agreement, if so resolved.

(VI) The date on which an arbitration proceeding commenced, if an arbitration proceeding commenced.

(VII) The date on which a determination was reached by the arbitration panel, if a determination was reached, and an indication as to whether the panel found in favor of the United States or the relevant treaty partner.

(iii) With respect to each dispute submitted to arbitration and for which a determination was reached by the arbitration panel pursuant to the Protocol or any such treaty, the following information:

(I) In the case of a dispute submitted under the Protocol, an indication as to whether the presenter of the case to the competent authority of a Contracting State submitted a Position Paper for consideration by the arbitration panel.

(II) An indication as to whether the determination of the arbitration America and Canada with Respect to Taxes on Income and on Capital, signed at Washington September 26, 1980 (the “2007 Canada Protocol”) (Treaty Doc. 110-15); and

(iv) the Protocol Amending the Convention between the Government of the United States of America and the Government of the French Republic for the Avoidance of Double Taxation and the Prevention of Fiscal Evasion with Respect to Taxes on Income and Capital, signed at Paris August 31, 1994 (the “2009 France Protocol”) (Treaty Doc. 111-4).

(3) The Secretary of the Treasury shall prepare and submit the detailed report required under paragraph (2) on March 1 of the year following the year in which the first report is submitted to the Joint Committee on Taxation and the Committee on Finance of the Senate, and on an annual basis thereafter for a period of five years. In each such report, disputes that were resolved, either by a mutual agreement between the relevant competent authorities or by a determination of an arbitration panel, and noted as such in prior reports may be omitted.

(4) The reporting requirements referred to in paragraphs (2) and (3) supersede the reporting requirements contained in paragraphs (2) and (3) of section 3 of the resolution of advice and consent to ratification of the 2009 France Protocol, approved by the Senate on December 3, 2009.

[Treaty Doc. #112-1 Protocol Amending Tax Convention with Swiss Confederation]

As reported by the Committee on Foreign Relations:

Resolved (two-thirds of the Senators present concurring therein),

Section 1. Senate Advice and Consent Subject to a Declaration and Conditions.

The Senate advises and consents to the ratification of the Protocol Amending the Convention between the United States of America and the Swiss Confederation for the Avoidance of Double Taxation with Respect to Taxes on Income, signed at Washington on October 2, 1996, signed on September 23, 2009, at Washington, as corrected by an exchange of notes effected November 16, 2010 (the “proposed Protocol”) (Treaty Doc. 112-1), and a related agreement effected by an exchange of notes on September 23, 2009 (the “related Agreement”) subject to the declaration of section 2 and the conditions in section 3.

Sec. 2. Declaration.

The advice and consent of the Senate under section 1 is subject to the following declaration: The Protocol is self-executing.

Sec. 3. Conditions.

The advice and consent of the Senate under section 1 is subject to the following conditions:

(1) Not later than 2 years after the Protocol enters into force and prior to the first arbitration conducted pursuant to the binding arbitration mechanism provided for in the Protocol, the Secretary of the Treasury shall transmit to the Committee on Finance and the Committee on Foreign Relations of the Senate and the Joint Committee on Taxation the text of the rules of procedure applicable to arbitration panels, including conflict of interest rules to be applied to members of the arbitration panel.

(2)(A) Not later than 60 days after a determination has been reached by an arbitration panel in the tenth arbitration proceeding conducted pursuant to the Protocol or any of the treaties described in subparagraph (B), the Secretary of the Treasury shall prepare and submit to the Joint Committee on Taxation and the Committee on Finance of the Senate, subject to laws relating to taxpayer confidentiality, a detailed report regarding the operation and application of the arbitration mechanism contained in the Protocol and such treaties. The report shall include the following information:

(i) For the Protocol and each such treaty, the aggregate number of cases pending on the respective dates of entry into force of the Protocol and each treaty, including the following information:

(I) The number of such cases by treaty article or articles at issue.

(II) The number of such cases that have been resolved by the competent authorities through a mutual agreement as of the date of the report.

(III) The number of such cases for which arbitration proceedings have commenced as of the date of the report.

(ii) A list of every case presented to the competent authorities after the entry into force of the Protocol and each such treaty, including the following information regarding each case:

(I) The commencement date of the case for purposes of determining when arbitration is available.

(II) Whether the adjustment triggering the case, if any, was made by the United States or the relevant treaty partner.

(III) Which treaty the case relates to.

(IV) The treaty article or articles at issue in the case.

(V) The date the case was resolved by the competent authorities through a mutual agreement, if so resolved.

(VI) The date on which an arbitration proceeding commenced, if an arbitration proceeding commenced.

(VII) The date on which a determination was reached by the arbitration panel, if a determination was reached, and an indication as to whether the panel found in favor of the United States or the relevant treaty partner.

(iii) With respect to each dispute submitted to arbitration and for which a determination was reached by the arbitration panel pursuant to the Protocol or any such treaty, the following information:

(I) In the case of a dispute submitted under the Protocol, an indication as to whether the presenter of the case to the competent authority of a Contracting State submitted a Position Paper for consideration by the arbitration panel.

(II) An indication as to whether the determination of the arbitration panel was accepted by each concerned person.

(III) The amount of income, expense, or taxation at issue in the case as determined by reference to the filings that were sufficient to set the commencement date of the case for purposes of determining when arbitration is available.

(IV) The proposed resolutions (income, expense, or taxation) submitted by each competent authority to the arbitration panel.

(B) The treaties referred to in subparagraph (A) are—

(i) the 2006 Protocol Amending the Convention between the United States of America and the Federal Republic of Germany for the Avoidance of Double Taxation and the Prevention of Fiscal Evasion with Respect to Taxes on Income and Capital, signed at Berlin June 1, 2006 (Treaty Doc. 109-20) (the “2006 German Protocol”);

(iii) The amount of income, expense, or taxation at issue in the case as determined by reference to the filings that were sufficient to set the commencement date of the case for purposes of determining when arbitration is available.

(IV) The proposed resolutions (income, expense, or taxation) submitted by each competent authority to the arbitration panel.

(B) The treaties referred to in subparagraph (A) are—

(i) the 2006 Protocol Amending the Convention between the United States of America and the Federal Republic of Germany for the Avoidance of Double Taxation and the Prevention of Fiscal Evasion with Respect to Taxes on Income and Capital and to Certain Other Taxes, done at Berlin June 1, 2006 (Treaty Doc. 109-20) (the “2006 German Protocol”);

(ii) the Convention between the Government of the United States of America and the Government of the Kingdom of Belgium for the Avoidance of Double Taxation and the Prevention of Fiscal Evasion with Respect to Taxes on Income, and accompanying protocol, done at Brussels July 9, 1970 (the “Belgium Convention”) (Treaty Doc. 110-3);

(iii) the Protocol Amending the Convention between the United States of America and Canada with Respect to Taxes on Income and on Capital, signed at Washington September 26, 1980 (the “2007 Canada Protocol”) (Treaty Doc. 110-15); and

(iv) the Protocol Amending the Convention between the Government of the United States of America and the Government of the French Republic for the Avoidance of Double Taxation and the Prevention of Fiscal Evasion with Respect to Taxes on Income and Capital, signed at Paris August 31, 1994 (the “2009 France Protocol”) (Treaty Doc. 111-4).

(3) The Secretary of the Treasury shall prepare and submit the detailed report required under paragraph (2) on March 1 of the year following the year in which the first report is submitted to the Joint Committee on Taxation and the Committee on Finance of the Senate, and on an annual basis thereafter for

a period of five years. In each such report, disputes that were resolved, either by a mutual agreement between the relevant competent authorities or by a determination of an arbitration panel, and noted as such in prior reports may be omitted.

(4) The reporting requirements referred to in paragraphs (2) and (3) supersede the reporting requirements contained in paragraphs (2) and (3) of section 3 of the resolution of advice and consent to ratification of the 2009 France Protocol, approved by the Senate on December 3, 2009.

[Treaty Doc. #111-8 Protocol Amending the Tax Convention with Luxembourg]

As reported by the Committee on Foreign Relations:

Resolved (two-thirds of the Senators present concurring therein),

Section 1. Senate Advice and Consent Subject to a Declaration.

The Senate advises and consents to the ratification of the Protocol Amending the Convention between the Government of the United States of America and the Government of the Grand Duchy of Luxembourg for the Avoidance of Double Taxation and the Prevention of Fiscal Evasion with Respect to Taxes on Income and Capital, signed on May 20, 2009, at Luxembourg (the "Protocol") and the related agreement effected by exchange of notes on May 20, 2009 (Treaty Doc. 111-8), subject to the declaration in section 2.

Sec. 2. Declaration.

The advice and consent of the Senate under section 1 is subject to the following declaration: The Protocol is self-executing.

INTRODUCTION OF BILLS AND JOINT RESOLUTIONS

The following bills and joint resolutions were introduced, read the first and second times by unanimous consent, and referred as indicated:

By Mr. CASEY:

S. 2067. A bill to amend title XIX of the Social Security Act to encourage States to disregard parental income and assets when determining Medicaid eligibility for disabled children; to the Committee on Finance.

By Mr. BOOKER:

S. 2068. A bill to prohibit the Bureau of the Census from including citizenship data in the legislative redistricting data prepared by the Bureau; to the Committee on Homeland Security and Governmental Affairs.

By Mr. MARKEY (for himself and Mrs. BLACKBURN):

S. 2069. A bill to assist prisoners of conscience in Burma, and for other purposes; to the Committee on Foreign Relations.

By Mr. MERKLEY (for himself, Mr. BLUMENTHAL, and Mr. WYDEN):

S. 2070. A bill to create a new Federal grant program that provides grants to State libraries to allow schools with summer lunch programs to keep their libraries open for student use during the summer months; to the Committee on Health, Education, Labor, and Pensions.

By Mr. ROUNDS (for himself, Ms. SINEMA, and Mr. LANKFORD):

S. 2071. A bill to repeal certain obsolete laws relating to Indians; to the Committee on Indian Affairs.

By Mr. ISAKSON (for himself, Mr. TESTER, Mr. MORAN, Mr. BOOZMAN, Mr. CASSIDY, Mr. ROUNDS, Mr. TILLIS, Mr. SULLIVAN, Mrs. BLACKBURN, Mr. CRAMER, Mrs. MURRAY, Mr. SANDERS, Mr. BROWN, Mr. BLUMENTHAL, Ms. HIRONO, Mr. MANCHIN, and Ms. SINEMA):

S. 2072. A bill to provide for an increase, effective December 1, 2019, in the rates of com-

pensation for veterans with service-connected disabilities and the rates of dependency and indemnity compensation for the survivors of certain disabled veterans, and for other purposes; to the Committee on Veterans' Affairs.

By Mr. BOOZMAN (for himself and Mr. TESTER):

S. 2073. A bill to address fees erroneously collected by Department of Veterans Affairs for housing loans, and for other purposes; to the Committee on Veterans' Affairs.

By Ms. HASSAN (for herself and Ms. MURKOWSKI):

S. 2074. A bill to amend section 303(g) of the Controlled Substances Act (21 U.S.C. 823(g)) to eliminate the separate registration requirement for dispensing narcotic drugs in schedule III, IV, or V, such as buprenorphine, for maintenance or detoxification treatment, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

By Ms. WARREN (for herself, Mr. SCHATZ, Mr. WHITEHOUSE, Mr. VAN HOLLEN, Ms. KLOBUCHAR, Mrs. GILLIBRAND, Mr. BENNET, Mr. BLUMENTHAL, Mr. BOOKER, Mr. MARKEY, Mr. MERKLEY, Ms. HARRIS, Ms. SMITH, Mrs. FEINSTEIN, Mr. SCHUMER, and Mr. CARPER):

S. 2075. A bill to amend the Securities Exchange Act of 1934 to require issuers to disclose certain activities relating to climate change, and for other purposes; to the Committee on Banking, Housing, and Urban Affairs.

By Ms. HARRIS (for herself and Mr. BOOKER):

S. 2076. A bill to reform the screening and eviction policies for Federal housing assistance in order to provide fair access to housing, and for other purposes; to the Committee on Banking, Housing, and Urban Affairs.

By Mr. MARKEY (for himself, Mr. BLUMENTHAL, and Mr. SCHATZ):

S. 2077. A bill to establish the complete streets program, and for other purposes; to the Committee on Environment and Public Works.

By Ms. MURKOWSKI:

S. 2078. A bill to amend the Internal Revenue Code of 1986 to treat Alaska Permanent Fund dividends as earned income for purposes of the kiddie tax; to the Committee on Finance.

By Ms. MURKOWSKI:

S. 2079. A bill to amend the Internal Revenue Code of 1986 to treat certain tribal benefits as earned income for purposes of the kiddie tax; to the Committee on Finance.

By Ms. BALDWIN (for herself, Mrs. CAPITO, Mr. KING, Mrs. HYDE-SMITH, Ms. SINEMA, Mr. CRAMER, Mrs. SHAHEEN, and Mr. HOEVEN):

S. 2080. A bill to amend the Public Health Service Act to increase the number of permanent faculty in palliative care at accredited allopathic and osteopathic medical schools, nursing schools, social work schools, and other programs, including physician assistant education programs, to promote education and research in palliative care and hospice, and to support the development of faculty careers in academic palliative medicine; to the Committee on Health, Education, Labor, and Pensions.

By Mr. PETERS (for himself and Ms. STABENOW):

S. 2081. A bill to amend title XVIII of the Social Security Act to require drug manufacturers to provide rebates for drugs furnished under Medicare part B for which the growth in average sales price has exceeded inflation, and for other purposes; to the Committee on Finance.

By Mr. COONS (for himself, Mr. COTTON, Mr. DURBIN, Ms. HIRONO, Mr. KENNEDY, and Mr. CRAMER):

S. 2082. A bill to strengthen the position of the United States as the world's leading innovator by amending title 35, United States Code, to protect the property rights of the inventors that grow the country's economy; to the Committee on the Judiciary.

By Mrs. FEINSTEIN (for herself and Mrs. MURRAY):

S. 2083. A bill to amend chapter 2205 of title 36, United States Code, to ensure pay equity for amateur athletes, and for other purposes; to the Committee on Commerce, Science, and Transportation.

By Mr. MARKEY (for himself, Mr. CARPER, Mr. SANDERS, and Mr. DURBIN):

S. 2084. A bill to amend title 23, United States Code, to require transportation planners to consider projects and strategies to reduce greenhouse gas emissions, and for other purposes; to the Committee on Environment and Public Works.

By Ms. ROSEN (for herself, Mr. CRAMER, Mr. RUBIO, and Mr. BLUMENTHAL):

S. 2085. A bill to authorize the Secretary of Education to award grants to eligible entities to carry out educational programs about the Holocaust, and for other purposes; to the Committee on Health, Education, Labor, and Pensions.

ADDITIONAL COSPONSORS

S. 133

At the request of Ms. MURKOWSKI, the name of the Senator from West Virginia (Mrs. CAPITO) was added as a cosponsor of S. 133, a bill to award a Congressional Gold Medal, collectively, to the United States merchant mariners of World War II, in recognition of their dedicated and vital service during World War II.

S. 153

At the request of Mr. RUBIO, the names of the Senator from Nebraska (Mrs. FISCHER) and the Senator from Michigan (Mr. PETERS) were added as cosponsors of S. 153, a bill to promote veteran involvement in STEM education, computer science, and scientific research, and for other purposes.

S. 284

At the request of Mr. ISAKSON, the name of the Senator from West Virginia (Mr. MANCHIN) was added as a cosponsor of S. 284, a bill to provide for a biennial budget process and a biennial appropriations process and to enhance oversight and the performance of the Federal Government.

S. 362

At the request of Mr. WYDEN, the name of the Senator from Oklahoma (Mr. INHOFE) was added as a cosponsor of S. 362, a bill to amend the Internal Revenue Code of 1986 to reform taxation of alcoholic beverages.

S. 382

At the request of Mr. BARRASSO, the name of the Senator from Montana (Mr. DAINES) was added as a cosponsor of S. 382, a bill to authorize a special resource study on the spread vectors of chronic wasting disease in Cervidae, and for other purposes.

S. 427

At the request of Mr. MENENDEZ, the names of the Senator from Connecticut

(Mr. MURPHY), the Senator from Alaska (Mr. SULLIVAN) and the Senator from Nevada (Ms. ROSEN) were added as cosponsors of S. 427, a bill to amend the Public Health Service Act to enhance activities of the National Institutes of Health with respect to research on autism spectrum disorder and enhance programs relating to autism, and for other purposes.

S. 474

At the request of Mr. WYDEN, the name of the Senator from Minnesota (Ms. SMITH) was added as a cosponsor of S. 474, a bill to amend title XI of the Social Security Act to require drug manufacturers to publicly justify unnecessary price increases.

S. 560

At the request of Ms. BALDWIN, the names of the Senator from Rhode Island (Mr. REED) and the Senator from Nebraska (Mrs. FISCHER) were added as cosponsors of S. 560, a bill to amend the Public Health Service Act, the Employee Retirement Income Security Act of 1974, and the Internal Revenue Code of 1986 to require that group and individual health insurance coverage and group health plans provide coverage for treatment of a congenital anomaly or birth defect.

S. 661

At the request of Ms. HIRONO, the name of the Senator from Pennsylvania (Mr. CASEY) was added as a cosponsor of S. 661, a bill to provide for enhanced protections for vulnerable alien children, and for other purposes.

S. 668

At the request of Mr. BROWN, the name of the Senator from Arizona (Ms. MCSALLY) was added as a cosponsor of S. 668, a bill to amend title XVIII of the Social Security Act to waive coinsurance under Medicare for colorectal cancer screening tests, regardless of whether therapeutic intervention is required during the screening.

S. 679

At the request of Ms. BALDWIN, the name of the Senator from South Carolina (Mr. SCOTT) was added as a cosponsor of S. 679, a bill to exempt from the calculation of monthly income certain benefit paid by the Department of Veterans Affairs and the Department of Defense.

S. 727

At the request of Mr. COONS, the name of the Senator from Maryland (Mr. VAN HOLLEN) was added as a cosponsor of S. 727, a bill to combat international extremism by addressing global fragility and violence and stabilizing conflict-affected areas, and for other purposes.

S. 741

At the request of Ms. SMITH, the names of the Senator from Rhode Island (Mr. WHITEHOUSE) and the Senator from West Virginia (Mrs. CAPITO) were added as cosponsors of S. 741, a bill to amend the Public Health Service Act to require group and individual health insurance coverage and group health

plans to provide for cost sharing for oral anticancer drugs on terms no less favorable than the cost sharing provided for anticancer medications administered by a health care provider.

S. 750

At the request of Mr. BLUNT, the names of the Senator from Louisiana (Mr. KENNEDY) and the Senator from Colorado (Mr. GARDNER) were added as cosponsors of S. 750, a bill to amend the Internal Revenue Code of 1986 to permanently extend the new markets tax credit, and for other purposes.

S. 785

At the request of Mr. TESTER, the name of the Senator from Montana (Mr. DAINES) was added as a cosponsor of S. 785, a bill to improve mental health care provided by the Department of Veterans Affairs, and for other purposes.

At the request of Mr. MORAN, the name of the Senator from Idaho (Mr. CRAPO) was added as a cosponsor of S. 785, *supra*.

S. 792

At the request of Ms. BALDWIN, the name of the Senator from Michigan (Mr. PETERS) was added as a cosponsor of S. 792, a bill to require enforcement against misbranded milk alternatives.

S. 800

At the request of Mr. CASSIDY, the names of the Senator from Pennsylvania (Mr. TOOMEY), the Senator from Illinois (Ms. DUCKWORTH), the Senator from Alaska (Mr. SULLIVAN) and the Senator from Minnesota (Ms. KLOBUCHAR) were added as cosponsors of S. 800, a bill to establish a postsecondary student data system.

S. 849

At the request of Mr. CRAMER, the name of the Senator from New York (Mr. SCHUMER) was added as a cosponsor of S. 849, a bill to provide for the inclusion on the Vietnam Veterans Memorial Wall of the names of the lost crew members of the U.S.S. Frank E. Evans killed on June 3, 1969.

S. 888

At the request of Mr. GRASSLEY, the name of the Senator from Alabama (Mr. JONES) was added as a cosponsor of S. 888, a bill to require a standard financial aid offer form, and for other purposes.

S. 980

At the request of Mr. BURR, the name of the Senator from Nebraska (Mrs. FISCHER) was added as a cosponsor of S. 980, a bill to amend title 38, United States Code, to improve the provision of services for homeless veterans, and for other purposes.

S. 1015

At the request of Mr. BURR, the name of the Senator from Maryland (Mr. CARDIN) was added as a cosponsor of S. 1015, a bill to require the Director of the Office of Management and Budget to review and make certain revisions to the Standard Occupational Classification System, and for other purposes.

S. 1081

At the request of Mr. MANCHIN, the name of the Senator from Illinois (Ms. DUCKWORTH) was added as a cosponsor of S. 1081, a bill to amend title 54, United States Code, to provide permanent, dedicated funding for the Land and Water Conservation Fund, and for other purposes.

S. 1088

At the request of Mr. MARKEY, the name of the Senator from New Jersey (Mr. MENENDEZ) was added as a cosponsor of S. 1088, a bill to amend the Immigration and Nationality Act to require the President to set a minimum annual goal for the number of refugees to be admitted, and for other purposes.

S. 1152

At the request of Mr. BOOZMAN, the name of the Senator from Indiana (Mr. BRAUN) was added as a cosponsor of S. 1152, a bill to provide for the transfer of administrative jurisdiction over certain parcels of Federal land in Arlington, Virginia, and for other purposes.

S. 1168

At the request of Mr. BLUNT, the name of the Senator from Arkansas (Mr. COTTON) was added as a cosponsor of S. 1168, a bill to amend the Higher Education Act of 1965 to ensure campus access at public institutions of higher education for religious groups.

S. 1183

At the request of Ms. KLOBUCHAR, the names of the Senator from Michigan (Ms. STABENOW) and the Senator from Maine (Ms. COLLINS) were added as cosponsors of S. 1183, a bill to establish an energy storage and microgrid grant and technical assistance program.

S. 1190

At the request of Mrs. CAPITO, the names of the Senator from Tennessee (Mrs. BLACKBURN) and the Senator from Montana (Mr. TESTER) were added as cosponsors of S. 1190, a bill to amend title XVIII of the Social Security Act to provide for payments for certain rural health clinic and Federally qualified health center services furnished to hospice patients under the Medicare program.

S. 1200

At the request of Mr. MERKLEY, the name of the Senator from Montana (Mr. TESTER) was added as a cosponsor of S. 1200, a bill to create protections for depository institutions that provide financial services to cannabis-related legitimate businesses and service providers for such businesses, and for other purposes.

S. 1252

At the request of Mr. MENENDEZ, the name of the Senator from New Hampshire (Mrs. SHAHEEN) was added as a cosponsor of S. 1252, a bill to direct the Secretary of State to review the termination characterization of former members of the Department of State who were fired by reason of the sexual orientation of the official, and for other purposes.

S. 1282

At the request of Mr. CRUZ, the names of the Senator from North Dakota (Mr. CRAMER) and the Senator from Utah (Mr. LEE) were added as cosponsors of S. 1282, a bill to amend the Internal Revenue Code of 1986 to repeal certain rules related to the determination of unrelated business taxable income.

S. 1317

At the request of Ms. MURKOWSKI, the names of the Senator from Wyoming (Mr. BARRASSO) and the Senator from West Virginia (Mrs. CAPITO) were added as cosponsors of S. 1317, a bill to facilitate the availability, development, and environmentally responsible production of domestic resources to meet national material or critical mineral needs, and for other purposes.

S. 1326

At the request of Mr. HOEVEN, the name of the Senator from West Virginia (Mr. MANCHIN) was added as a cosponsor of S. 1326, a bill to amend the Animal Health Protection Act to establish a grant program for research on chronic wasting disease, and for other purposes.

S. 1374

At the request of Ms. MCSALLY, the names of the Senator from West Virginia (Mrs. CAPITO) and the Senator from New York (Mrs. GILLIBRAND) were added as cosponsors of S. 1374, a bill to amend title II of the Social Security Act to eliminate the waiting periods for disability insurance benefits and Medicare coverage for individuals with metastatic breast cancer, and for other purposes.

S. 1902

At the request of Mr. CASEY, the name of the Senator from Massachusetts (Mr. MARKEY) was added as a cosponsor of S. 1902, a bill to require the Consumer Product Safety Commission to promulgate a consumer product safety rule for free-standing clothing storage units to protect children from tip-over related death or injury, and for other purposes.

S. 1906

At the request of Mr. BOOZMAN, the name of the Senator from Arizona (Ms. MCSALLY) was added as a cosponsor of S. 1906, a bill to require the Secretary of Veterans Affairs to provide financial assistance to eligible entities to provide and coordinate the provision of suicide prevention services for veterans at risk of suicide and veteran families through the award of grants to such entities, and for other purposes.

S. 2023

At the request of Mr. RISCH, the name of the Senator from Alaska (Ms. MURKOWSKI) was added as a cosponsor of S. 2023, a bill to modify the Federal and State Technology Partnership Program of the Small Business Administration, and for other purposes.

S. 2054

At the request of Mr. MARKEY, the names of the Senator from Nevada (Ms.

ROSEN), the Senator from Maine (Ms. COLLINS) and the Senator from North Carolina (Mr. BURR) were added as cosponsors of S. 2054, a bill to posthumously award the Congressional Gold Medal, collectively, to Glen Doherty, Tyrone Woods, J. Christopher Stevens, and Sean Smith, in recognition of their contributions to the Nation.

S. 2062

At the request of Mr. MANCHIN, the names of the Senator from Oregon (Mr. WYDEN), the Senator from Massachusetts (Mr. MARKEY), the Senator from Minnesota (Ms. KLOBUCHAR), the Senator from Ohio (Mr. BROWN), the Senator from Vermont (Mr. SANDERS) and the Senator from New York (Mrs. GILLIBRAND) were added as cosponsors of S. 2062, a bill to prohibit the use of funds for the 2026 World Cup unless the United States Soccer Federation provides equitable pay to the members of the United States Women's National Team and the United States Men's National Team.

S. CON. RES. 9

At the request of Mr. ROBERTS, the name of the Senator from Wisconsin (Mr. JOHNSON) was added as a cosponsor of S. Con. Res. 9, a concurrent resolution expressing the sense of Congress that tax-exempt fraternal benefit societies have historically provided and continue to provide critical benefits to the people and communities of the United States.

S. RES. 142

At the request of Mr. MARKEY, the names of the Senator from Minnesota (Ms. SMITH) and the Senator from Vermont (Mr. LEAHY) were added as cosponsors of S. Res. 142, a resolution condemning the Government of the Philippines for its continued detention of Senator Leila De Lima, calling for her immediate release, and for other purposes.

S. RES. 194

At the request of Mr. GRASSLEY, the names of the Senator from Tennessee (Mrs. BLACKBURN) and the Senator from Illinois (Mr. DURBIN) were added as cosponsors of S. Res. 194, a resolution designating July 30, 2019, as "National Whistleblower Appreciation Day".

S. RES. 252

At the request of Mr. GRAHAM, the name of the Senator from Missouri (Mr. BLUNT) was added as a cosponsor of S. Res. 252, a resolution designating September 2019 as National Democracy Month as a time to reflect on the contributions of the system of government of the United States to a more free and stable world.

STATEMENTS ON INTRODUCED BILLS AND JOINT RESOLUTIONS

By Mrs. FEINSTEIN (for herself and Mrs. MURRAY):

S. 2083. A bill to amend chapter 2205 of title 36, United States Code, to ensure pay equity for amateur athletes,

and for other purposes; to the Committee on Commerce, Science, and Transportation.

Mrs. FEINSTEIN. Mr. President, I rise today to introduce the Athletics Fair Pay Act of 2019 with my colleague Senator MURRAY.

Women and girls have made great strides in sports. Before Title IX of the Civil Rights Act was passed 47 years ago, athletic programs for girls and young women were virtually nonexistent. Now, women are world class athletes and compete in a wide range of sports including soccer, basketball, hockey, and tennis.

In the 2016 Olympic Games in Rio de Janeiro, a record 45 percent of the athletes competing at the games were women, and this year, the U.S. Women's National Soccer Team won a historic fourth FIFA Women's World Cup title. Despite the incredible advancements made by women in sports, female athletes are paid significantly less than their male counterparts and are given fewer opportunities to succeed.

Sports organizations in the United States still do not invest equally in girls' and women's athletics. This lack of investment means that many female athletes never reach their full potential. In addition, studies show that sports participation has a positive influence on girls' academic performance, employment opportunities, and their physical and mental health.

The inequities faced by female athletes were highlighted in a wage discrimination lawsuit recently filed by the U.S. Women's Soccer Team against their employer, the U.S. Soccer Federation.

In addition to winning four FIFA Women's World Cup titles, the Women's Soccer Team has won four Olympic gold medals and has been ranked number one by FIFA for 10 of the last 11 years. By contrast, the U.S. Men's Soccer Team failed to qualify for last year's World Cup and has not won an Olympic medal since 1904. Yet, according to the lawsuit filed by the Women's Team, the U.S. Soccer Federation pays the women an average of 38 cents on the dollar compared to the male players.

Unfortunately, the Women's Soccer Team is not alone. In 2017, the U.S. Women's Hockey Team received a pay raise from its national governing body, USA Hockey, only after the team threatened to boycott a major competition.

Prior to the boycott, USA Hockey did not pay female athletes at all in non-Olympic years and paid each just \$6,000 in the year leading up to an Olympic games.

It is clear that we must do more to ensure that female athletes are paid equally and treated with the respect and dignity they deserve. This legislation gets us closer to that goal.

This legislation updates the Ted Stevens Olympic and Amateur Sports Act to mandate that the national governing bodies chartered under the Ted

Stevens Act pay female amateur athletes fairly and equally.

This bill also requires national governing bodies to provide annual reports to Congress on amateur athlete pay. This new reporting requirement increases accountability and allows Congress to monitor whether the national governing bodies are complying with their equal pay obligations.

I am deeply disappointed that we still need this kind of legislation in 2019. I am hopeful that the Senate will take up, and pass, this important legislation and show its support for women around the country. As a United States Senator, I will continue fighting for fair pay and equality of treatment for all women, including our nation's athletes.

I thank the president, and I yield the floor.

AUTHORITY FOR COMMITTEES TO MEET

Mr. BARRASSO. Mr. President, I have 5 requests for committees to meet during today's session of the Senate. They have the approval of the Majority and Minority leaders.

Pursuant rule XXVI, paragraph 5(a), of the Standing Rules of the Senate, the following committees are authorized to meet during today's session of the Senate:

COMMITTEE ON ARMED SERVICES

The Committee on Armed Services is authorized to meet during the session of the Senate on Wednesday, July 10, 2019, at 10 a.m., to conduct a hearing pending military nominations.

COMMITTEE ON COMMERCE, SCIENCE, AND TRANSPORTATION

The Committee on Commerce, Science, and Transportation is authorized to meet during the session of the Senate on Wednesday, July 10, 2019, at 10 a.m., to conduct a hearing on the following nominations: Stephen M. Dickson, of Georgia, to be Administrator of the Federal Aviation Administration, Michelle A. Schultz, of Pennsylvania, to be a Member of the Surface Transportation Board, and a routine list in the Coast Guard.

COMMITTEE ON ENVIRONMENT AND PUBLIC WORKS

The Committee on Environment and Public Works is authorized to meet during the session of the Senate on Wednesday, July 10, 2019, at 10 a.m., to conduct a hearing.

COMMITTEE ON FOREIGN RELATIONS

The Committee on Foreign Relations is authorized to meet during the session of the Senate on Wednesday, July 10, 2019, at 10:15 a.m., to conduct a hearing.

SPECIAL COMMITTEE ON AGING

The Special Committee on Aging is authorized to meet during the session of the Senate on Wednesday, July 10, 2019, at 9:30 a.m., to conduct a hearing.

NOTICE: REGISTRATION OF MASS MAILINGS

The filing date for the 2019 second quarter Mass Mailing report is Thursday, July 25, 2019. An electronic option is available on Webster that will allow forms to be submitted via a fillable PDF document. If your office did no mass mailings during this period, please submit a form that states "none."

Mass mailing registrations or negative reports can be submitted electronically at <http://webster.senate.gov/secretary/mass-mailing-form.htm> or delivered to the Senate Office of Public Records, 232 Hart Building, Washington, D.C. 20510-7116.

The Senate Office of Public Records is open from 9:00 a.m. to 6:00 p.m. (9:00 a.m. to 5:00 p.m. when the Senate is not in session). For further information, please contact the Senate Office of Public Records at (202) 224-0322.

MAKING TECHNICAL CORRECTIONS TO THE AMERICA'S WATER INFRASTRUCTURE ACT OF 2018

Mr. MCCONNELL. Mr. President, I ask unanimous consent that the Committee on Environment and Public Works be discharged from further consideration of S. 1811 and the Senate proceed to its immediate consideration.

The PRESIDING OFFICER. The clerk will report the bill by title.

The bill clerk read as follows:

A bill (S. 1811) to make technical corrections to the America's Water Infrastructure Act of 2018, and for other purposes.

There being no objection, the committee was discharged, and the Senate proceeded to consider the bill.

Mr. MCCONNELL. I ask unanimous consent that the bill be considered read a third time.

The PRESIDING OFFICER. Without objection, it is so ordered.

The bill was ordered to be engrossed for a third reading and was read the third time.

Mr. MCCONNELL. I know of no further debate on the bill.

The PRESIDING OFFICER. If there is no further debate, the bill having been read the third time, the question is, Shall the bill pass?

The bill (S. 1811) was passed, as follows:

S. 1811

Be it enacted by the Senate and House of Representatives of the United States of America in Congress assembled,

SECTION 1. NON-FEDERAL IMPLEMENTATION PILOT PROGRAM.

Section 1043(b)(7) of the Water Resources Reform and Development Act of 2014 (33 U.S.C. 2201 note) is amended by striking "5 years" and inserting "10 years".

SEC. 2. MAINTENANCE AND CONSTRUCTION OF WATER RESOURCES DEVELOPMENT PROJECTS BY NON-FEDERAL INTERESTS.

Section 204(c)(1) of the Water Resources Development Act of 1986 (33 U.S.C. 2232(c)(1)) is amended by striking "under subsection (b)" and inserting "under this section".

SEC. 3. WATERCRAFT INSPECTION STATIONS.

Section 104(d)(1)(A)(iii) of the River and Harbor Act of 1958 (33 U.S.C. 610(d)(1)(A)(iii)) is amended by striking "Arizona River" and inserting "Arkansas River".

SEC. 4. LOCAL GOVERNMENT RESERVOIR PERMIT REVIEW.

Section 1119(b) of the America's Water Infrastructure Act of 2018 (Public Law 115-270) is amended by striking "owned or operated by the Secretary".

SEC. 5. UPPER MISSISSIPPI RIVER PROTECTION.

Section 2010(e) of the Water Resources Reform and Development Act of 2014 (128 Stat. 1270) is amended by striking "the Act of October 15, 1940 (33 U.S.C. 701h-1)" and inserting "section 5 of the Act of June 22, 1936 (commonly known as the 'Flood Control Act of 1936') (49 Stat. 1572, chapter 688; 33 U.S.C. 701h)".

SEC. 6. BENEFICIAL USE OF DREDGED MATERIAL.

Section 1148 of the America's Water Infrastructure Act of 2018 (Public Law 115-270) is amended—

- (1) in subsection (a)—
 - (A) by striking "grant" and inserting "approve"; and
 - (B) by striking "granting" and inserting "approving"; and
- (2) in subsection (b), by striking "grants" and inserting "approves".

SEC. 7. KLAMATH BASIN WATER SUPPLY ENHANCEMENT ACT OF 2000 TECHNICAL CORRECTIONS.

Section 4(b) of the Klamath Basin Water Supply Enhancement Act of 2000 (114 Stat. 2222) is amended—

- (1) in paragraph (1)—
 - (A) in the matter preceding subparagraph (A)—
 - (i) by striking "Pursuant to the reclamation laws and subject" and inserting "Subject"; and
 - (ii) by striking "may" and inserting "is authorized to"; and
 - (B) in subparagraph (A), by inserting ", including conservation and efficiency measures, land idling, and use of groundwater," after "administer programs";
- (2) in paragraph (3)(A), by inserting "and" after the semicolon at the end;
- (3) by redesignating the second paragraph (4) (relating to the effect of the subsection) as paragraph (5); and
- (4) in paragraph (5) (as so redesignated)—
 - (A) by striking subparagraph (B);
 - (B) in subparagraph (A), by striking "; or" and inserting a period; and
 - (C) by striking "the Secretary—" and all that follows through "to develop" in subparagraph (A) and inserting "the Secretary to develop".

Mr. MCCONNELL. I ask unanimous consent that the motion to reconsider be considered made and laid upon the table.

The PRESIDING OFFICER. Without objection, it is so ordered.

ORDERS FOR THURSDAY, JULY 11, 2019

Mr. MCCONNELL. Mr. President, I ask unanimous consent that when the Senate completes its business today, it adjourn until 9:30 a.m., Thursday, July 11; further, that following the prayer and pledge, the morning hour be deemed expired, the Journal of proceedings be approved to date, the time for the two leaders be reserved for their use later in the day, morning business be closed, and the Senate proceed to

executive session and resume consideration of the King nomination.

The PRESIDING OFFICER. Without objection, it is so ordered.

ADJOURNMENT UNTIL 9:30 A.M.
TOMORROW

Mr. McCONNELL. Mr. President, if there is no further business to come before the Senate, I ask unanimous con-

sent that it stand adjourned under the previous order.

There being no objection, the Senate, at 6:16 p.m., adjourned until Thursday, July 11, 2019, at 9:30 a.m.

CONFIRMATIONS

Executive nominations confirmed by the Senate July 10, 2019:

THE JUDICIARY

T. KENT WETHERELL II, OF FLORIDA, TO BE UNITED STATES DISTRICT JUDGE FOR THE NORTHERN DISTRICT OF FLORIDA.

DAMON RAY LEICHTY, OF INDIANA, TO BE UNITED STATES DISTRICT JUDGE FOR THE NORTHERN DISTRICT OF INDIANA.

J. NICHOLAS RANJAN, OF PENNSYLVANIA, TO BE UNITED STATES DISTRICT JUDGE FOR THE WESTERN DISTRICT OF PENNSYLVANIA.